DOCUMENT RESUME

ED 062 002 PS 005 454

TITLE	Child Care Data and Services.
INSTITUTION	Congress of the U.S., Washington, D.C. Senate Committee on Finance.
PUB DATE	16 Jun 71
NOTE	161p.
EDRS PRICE	MF-$0.65 HC-$6.58
DESCRIPTORS	*Child Care; Cost Effectiveness; *Data Collection; *Day Care Services; Federal Aid; Financial Needs; Legislation; Mothers; Publications; *Statistical Data; Working Women

ABSTRACT

A publication releasing the most important current statistics, reports, statutory language, and regulations on child care is presented. Data are presented under the following general topics: (1) Child Care Services and Working Mothers, (2) Child Care Arrangements of Working Mothers Today, (3) Federal Assistance for Child Care, (4) How Much Does Child Care Cost?, and (5) Barriers to Expansion of Child Care. Salient factors brought out in this report include: (1) Number of children greatly influences mother's choice of child care arrangement; (2) Most Federal support for the cost of child care provided children of working mothers comes from programs authorized under the Social Security Act; (3) For full-day care in a child care center, the cost per child ranges from $1,245 to $2,320; and (4) Lack of funds and staff shortages hinder the expansion of child care. The statistical data are presented in 37 tables. Nine appendixes contain excerpts from publications, reports, and legislation, as well as Standards and Costs for Day Care, and Federal Interagency Day Care Requirements. (CK)

ED 062002

PS 005454

92d Congress }
1st Session }
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CHILD CARE

DATA AND MATERIALS

COMMITTEE ON FINANCE
UNITED STATES SENATE
Russell B. Long, Chairman

JUNE 16, 1971

Prepared by the staff for the use of the Committee on Finance

U.S. GOVERNMENT PRINTING OFFICE
59-588
WASHINGTON : 1971

For sale by the Superintendent of Documents, U.S. Government Printing Office
Washington, D.C. 20402 - Price 65 cents

ED 095005

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FOREWORD

The Committee on Finance has long been involved in issues relating to child care. The Committee has been dealing with child care as a segment of the child welfare program under the Social Security Act since the original enactment of the legislation in 1935. Over the years, authorizations for child welfare funds were increased in legislation acted on by the Committee.

A new emphasis began with the Public Welfare Amendments of 1962, in which the Committee placed increased stress on child care services through a specific earmarking of child welfare funds for the provision of child care for working mothers. In the 1967 Social Security Amendments, the Committee made what it believed to be a monumental commitment to the expansion of child care services as part of the work incentive program. Although the legislative hopes have not been met, and much less child care has been provided than was anticipated, it is a fact that child care provided under the Social Security Act constitutes the major Federal support for the care of children of working parents today. Through its support of child welfare legislation and programs, the Committee has shown its interest, too, in the quality of care which children receive.

Despite widespread interest in child care, current information on child care is often not conveniently available to persons involved in child care research, planning, and operations. This document is designed to fill the void by bringing together in one publication the most important current statistics, reports, statutory language, and regulations on child care. It is my hope that persons interested in child care will find this document helpful and informative.

Russell B. Long, *Chairman.*

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CHILD CARE

Child Care Services and Working Mothers

Child care has been attracting increasing attention in recent years both because of the growing proportion of mothers who work and because efforts to help the growing number of welfare mothers to become economically independent require the availability of child care services.

Participation of mothers in the labor force.—Between 1950 and 1970 the participation of women in the labor force increased from 33 percent to 43 percent. During the same period, however, the labor force participation of mothers rose even more dramatically, almost doubling over the 20 years from 22 percent in 1950 to 42 percent in 1970. Today, 11.6 million women with children under age 18 are in the labor force.

Table 1 p. 19

The increase has been dramatic both for women with children of preschool age and for women with school-age children only. In March 1969, 4.2 million mothers with children under 6 years of age participated in the labor force, representing 30 percent of the 13.9 million women with preschool-age children. In that same month, 7.4 million or 51 percent of the 14.5 million women with children ages 6 to 17 (but without children under 6) were members of the labor force. According to projections of the Department of Labor, labor force participation of mothers is expected to continue increasing during this decade.

Tables 2–3, pp. 20–21

Welfare mothers.—Most families receiving Aid to Families with Dependent Children today consist of a mother and children, with no father present. Of the more than 2½ million families receiving AFDC in December 1970, an estimated 1.5 million have a child under age 6. In about 700,000 of the families, the youngest child is between the ages of 6 and 12. In terms of numbers of children, one-third (2.3 million) of the 7 million children on the AFDC rolls in December 1970 were under 6 years of age, while two-fifths (2.9 million) were between 6 and 12 years old.

Table 4, p. 22

Table 5, p. 23

In view of the number of children on welfare requiring child care in order for their mothers to work, it is not surprising that a number of studies conducted by and for the Department of Health, Education, and Welfare in recent years have pointed up the major barrier to employment of welfare mothers that lack of child care represents:

—A study conducted by the Bureau of Social Science Research in 1969 entitled "Welfare Policy and Its Consequences for the Recipient Population: A Study of the AFDC Program" identified domestic responsibilities as one of the three major obstacles to employment. After outlining other barriers to employment, the study added (p. 126) that "in many cases it was felt that these could be overcome if suitable child care arrangements were available, and many (mothers) would prefer employment to welfare if such arrangements could be made. . . . It was, naturally enough, the younger women . . . who were most often kept from working because there were no child care arrangements available."

—An article by Dr. Perry Levinson, "How Employable Are AFDC Women?" appearing in the July-August 1970 issue of *Welfare in Review* showed that almost two-thirds of the AFDC mothers identified poor availability of day care or dissatisfaction with day care arrangements as conditions limiting or preventing their employment, while more than three-fourths of the mothers listed "young children" as an employment barrier.

—A study by Irene Cox, "The Employment of Mothers as a Means of Family Support" appearing in the November–December 1970 issue of *Welfare in Review* estimated that 45 percent to 55 percent of AFDC mothers are potentially employable because of age, education, and work experience but that two major barriers deter employment, the presence of young children being one of them.

—A study entitled "Impediments to Employment," completed in 1969 for the Department of Health, Education, and Welfare by Greenleigh Associates concluded (p. 83) that "responsibility for the care of children was an impediment to employment mentioned as frequently as lack of job skills by the women in low-income households." In an earlier assessment of the employment potential of AFDC mothers in Cook County, Greenleigh Associates found that "the most serious deterrent to employment was lack of child care. Over two-fifths of the grantees could not be employed because they had too many young children to make day care a practical solution. Another two-fifths could take advantage of day care facilities if such services were provided." (quoted in "Impediments to Employment," p. 87).

—A report by the National Analysts for the Department of Health, Education, and Welfare dated October 1970 found (p. 27) that "child care responsibilities . . . constitute the largest reported obstacle for the [AFDC] women who are not in the market for a job. . . . More than one-half (51%) of the women report child care responsibilities as a major reason for failing to seek employment."

Child Care Arrangements of Working Mothers Today

The most recent detailed information on the care of children while their mothers work is contained in a study entitled "Child Care Arrangements of Working Mothers in the United States," conducted by the Children's Bureau and the Women's Bureau based on 1965 statistics. The study showed that about half of the 8.3 million children of mothers working full time in 1965 were cared for in their own home, usually by a member of their own family or a relative. Ten percent were cared for in the home of a relative, and another 10 percent were cared for in the home of someone who was not a relative. Only three percent of the children were cared for in a group care center.

Appendix A, pp. 85–87

Table 6, pp. 24–25

Of the children under six, 47 percent were cared for in their own home, 37 percent were cared for in someone else's home and 8 percent received care in group care centers, with the remainder in other arrangements. Of the school-age children, 50 percent received before-and-after-school care in their own home, 12 percent were cared for in someone else's home, 14 percent looked after themselves, and 16 percent required no child care arrangements because their mothers worked only during school hours.

Why do mothers select one kind of child care arrangement rather than another? In a paper entitled "Realistic Planning for the Day Care Consumer" (*The Social Welfare Forum, 1970,* pp. 127–142), Arthur C. Emlen suggests that number of children and location are factors as important in determining the type of child care arrangement as is a mother's preference in type of care.

The importance of the number of children in influencing a mother's choice of child care arrangement is shown in the Children's Bureau-Women's Bureau 1965 study; the proportion of children being cared for in their own home was 36 percent when there was only one child under 14 in the family, 46 percent when there were two or three, and 53 percent when there were four or more children. A study by Florence Ruderman (*Child Care and Working Mothers,* Child Welfare League of America, 1968) showed that one-third of child care center users and 70 percent of family day care users were within five minutes of the child care services.

Cost of child care must also be an important factor in determining a mother's choice of arrangement. Of course, these three factors (number of children in the family, proximity of child care services, and cost) are not themselves directly related to the quality of care.

Appendix B, pp. 88–101,

A study recently completed by the Westinghouse Learning Corporation surveyed the child care arrangements in 1970 of working mothers in families in which (1) there was at least one child under age 10, and (2) total family income was under $8,000. Though the statistics are not on the same basis as the 1965 study, it appears that about the same proportion of children were cared for in family day care homes, while there was a substantial increase in the number of children receiving care in child care centers.

Tables 7–8, pp. 26–29

An increase in child care centers is similarly reflected in statistics of the Department of Health, Education, and Welfare which have shown an increase in the number and capacity of licensed or approved day care centers in recent years. A total of 13,600 day care centers with a capacity for 517,900 children were licensed in 1969, compared with 10,400 centers with a capacity for 393,300 children two years earlier. In 1969, a total of 32,700 family day care homes with a capacity of 120,400 children were also licensed, for a total capacity in licensed facilities for 638,300 children—compared with more than 8 million children under 14 whose mothers work full time.

The only State with a substantially State-supported child care program today is California; this accounts for the disproportionate share of the Nation's child care center capacity in that State. The "Child's Centers" program is run by the State Education Department; the primary purpose of the program is to serve the children of women who must work outside the home to support their families. Under a sliding fee schedule, mothers pay part or all of the cost of the child care.

The Westinghouse Learning Corporation estimates that 90 percent of the child care centers in operation in the United States are licensed, while less than two percent of the family day care homes are licensed. Most States do not require licensing of family day care homes if less than three children receive child care.

Table 9, p. 30

Table 10, p. 30

Based on their survey, the Westinghouse Learning Corporation estimated that 58 percent of the Nation's child care centers are proprietary; the rest are operated principally by churches (18 percent) or community agencies (including Community Action Agencies operating Head Start programs). The most common facilities were in homes (39 percent), with churches and buildings especially for child care each representing 22 percent of the total.

Proprietary day care centers were most often used by families with relatively higher income (almost three quarters of the users had family income above $6,000), while non-proprietary facilities were most often used by families with lower income (more than three quarters of the users had family income below $6,000). *Table 11, p. 31* Somewhat more than half of the day care centers surveyed also provided before-and-after-school care to school-age children. *Table 12, p. 31*

Employer and employee union involvement.—A study recently issued by the Women's Bureau ("Day Care Services: Industry's Involvement," Bulletin 296, 1971) surveyed the extent to which employers and employee unions have established child care centers for working mothers. To date, only a small number of companies and two unions are involved directly and a few others indirectly.

The Women's Bureau survey describes child care centers operated by five textile product manufacturing companies (Curlee Clothing, Mr. Apparel, Skyland Textile, Tioga Sportswear, and Vanderbilt Shirt), two food processing companies (Tyson Foods and Winter Garden Freezing Co.), and three other companies (Arco Economic Systems, Control Data Corporation, and Bro-Dart Industries). The work forces of most of these companies are predominantly female.

All of the child care facilities are within, adjacent to, or adjoining the plant facilities of the company. Two were constructed as child care centers, with the rest housed in converted residences, warehouses, or other types of space. The capacity of the centers generally ranges from 40 to 65 children, but most of the centers are not operating at capacity. Three of the centers restrict admission to the children of employees, but the rest accept other children.

The Baltimore Regional Joint Board of the Amalgamated Clothing Workers of America has opened four centers (Verona, Va.; Baltimore, Md.; Chambersburg, Pa.; and Hanover, Pa.) with a total capacity for 920 children. The centers offer educational, social, nutritional, and health services. Mothers pay $5 per week to the center, with the balance of the cost financed by employer contributions from some 70 companies for whom the mothers work. Another center, with a capacity for 75 children, is operated by the Chicago Joint Board of the Amalgamated Clothing Workers of America.

The Women's Bureau survey also describes an early childhood program established under the United Federation of Teachers contract with the New York City Board of Education. The program is designed to provide care and education to the children of teachers returning to teach in poverty area schools and to children of residents in the community.

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Centers for Federal employees.—Within the Federal Government, child care centers have been set up in the Department of Labor, in the Agriculture Department Research Center at Beltsville, Md., and in the Department of Health, Education, and Welfare. Both the Labor Department and Department of Health, Education, and Welfare centers are subsidized, with parents paying fees on a sliding scale related to income, with the lowest fee being $1 per week per child. The Beltsville center is sponsored by two employee organizations, with operating costs borne by the parents.

Centers operated by hospitals.—In another recent publication ("Child Care Services Provided by Hospitals," Women's Bureau Bulletin 295, 1970) the Women's Bureau reported that 98 hospitals in 35 States were operating child care facilities for use of their personnel. The centers could accommodate about 3,700 children; almost half enrolled school-age as well as preschool-age children. Nearly all the hospitals charged fees for the services, but most subsidized child care center operational costs.

Federal Assistance for Child Care

Operational Support

Appendixes C & D pp. 102–107

Most Federal support for the cost of child care provided children of working mothers comes from programs authorized under the Social Security Act; most of the child care funds spent under that Act are related to the care of children whose mothers work. About $170 million in Federal funds was used for child care services under the Social Security Act in fiscal year 1970, and this total is estimated to rise to about $310 million in fiscal year 1971. The average number of children receiving child care under programs authorized by the Social Security Act is expected to rise from 450,000 in fiscal year 1970 to 630,000 in fiscal year 1971.

Table 13, pp. 32–33

Under the Aid to Families with Dependent Children program (title IV, Part A of the Social Security Act), Federal funds are available to pay part of the cost of child care in three ways:

(1) 75% Federal matching is available to the States under an earmarked appropriation for child care services to mothers participating in the Work Incentive Program;

(2) 75% Federal matching is available to the States for child care services provided employed mothers not participating in the Work Incentive Program. Low-income mothers not on welfare but likely to become dependent may at the State's option also receive Federally-matched subsidization of child care costs under this provision; and

(3) Child care costs may be considered a necessary work expense in determining income for welfare purposes, in

effect reimbursing a mother through the welfare payment for the cost of child care.

Under the child welfare services program (Title IV, Part B of the Social Security Act), grants are made to State public welfare agencies for child welfare services; child care services may be included.

Child care under the AFDC program (other than WIN child care).—In fiscal year 1970, an average of 112,000 children of mothers either receiving welfare or likely to become dependent on welfare were provided child care under direct payment by the State welfare agency, with 75 percent Federal matching; the total Federal cost was $96 million. In fiscal year 1971, it is estimated that this amount will increase to $205 million, with an average of 170,000 children provided child care services. *Table 14, pp. 34–35*

States may provide a partial or total subsidy of the child care costs of low-income working mothers whose income is too high to be eligible for welfare assistance; 75 percent Federal matching is available. Most States have chosen not to take advantage of this provision. The Department of Health, Education, and Welfare reports that Illinois and the District of Columbia will pay the full cost and New York will pay most of the cost of child care up to an income limit; Alabama and Iowa will pay for child care for the first 3 months a mother is employed, and Maryland will continue subsidizing the child care costs of a former welfare mother for up to a year following employment.

Since child care costs may be subtracted from income in determining the amount of welfare a family is entitled to, all States provide partial subsidization of child care costs to families whose income would make them ineligible for welfare were the child care costs not subtracted. For example, in a State with a needs-standard of $300 for a family of four, a mother with countable income of $310 may deduct $60 in monthly child care expenses and receive a $50 monthly welfare check—in effect a partial subsidy of the cost of the care.

In fiscal year 1970, an average of 265,000 children had their day care paid for by their mothers with the cost deducted as a work expense; the Federal cost was an estimated $50 million. This amount is expected to increase in fiscal 1971 to $59 million with child care provided for an average of 300,000 children. *Table 13, pp. 32–33*

Costs per year of child care averaged $1,140 in fiscal year 1970 when paid by the State welfare agency; the amount of child care costs deducted as a work expense averaged $315. The difference reflects the fact that in many cases only a part of the child care cost is deducted; it probably also indicates that mothers arrange for a less expensive form of child care when they are required to find it and pay for it themselves, with subsequent reimbursement.

Table 14, pp. 34–35

Though the cost per year of child care paid for by State welfare agencies averaged $1,140 in fiscal year 1970, the average in the individual States varied widely. In fiscal year 1971, 13 States will average between $25 and $50 per month; 12 States will average between $50 and $100 per month; 12 States will average between $100 and $150 per month; and 10 States will average more than $150 per month.

Tables 15–16, pp. 36–38

Child care under the child welfare services grant program.—The Department of Health, Education, and Welfare estimates that about $21 million was spent in fiscal year 1969 for child care provided under the Child Welfare Services Grant program; Federal funds represented about 15 percent of this amount. An average of about 20,000 children receive child care under the child welfare services program; though priority is given to low-income mothers, they need not be welfare recipients in order to qualify.

Tables 17–25 pp. 39–57

Child care under the Work Incentive Program.—The Social Security Act (Section 402(a)(15)) requires that child care services be furnished for any mother referred to and enrolled in the Work Incentive Program. In December 1970 child care services were provided to a total of 126,000 children whose mothers were enrolled in the program.

Of this total, 57,100 of the children were under 6 years of age. About 46 percent of these preschool-age children received child care in their own home; 12 percent in relatives' homes; 15 percent in family or group day care homes; and 15 percent in day care centers.

In that same month, child care services were also provided to 68,900 school-age children whose mothers were enrolled in the Work Incentive Program. About 47 percent of these children received care in their own home; 8 percent in relatives' homes; 9 percent in family or group day care homes; 5 percent in day care centers; 6 percent of the children looked after themselves; and for 15 percent of the children, the mothers participated in the program only while the children were in school.

Appendix E, pp. 108–126

The types of child care arrangements made under the WIN program are thus similar to those made by working mothers generally. This is not surprising, since according to the report of the Auerbach Corporation on the Work Incentive Program, it is the mothers themselves who arrange for the child care:

> In the cities selected for the child care studies, slightly over two hundred mothers were interviewed to determine their need for child care, what they were told about child

care, and how it was obtained. Our results show that not only did the overwhelming majority (eighty-eight percent) arrange their own plans, independent of welfare, but that most (eighty percent) were informed by their caseworkers that it was their responsibility to do so. Even more discouraging is the fact that the majority of mothers (eighty-three percent) who were informed about child care by their caseworker were left with the impression that they could make use of any service they wanted; approved services were not required.

The attitude at the local level also seems to have been a factor in the inability of the Department of Health, Education, and Welfare to use funds appropriated for WIN child care. Of $25 million appropriated for fiscal year 1969, only $4 million was used; of $52 million appropriated for fiscal year 1970, only $18 million was used. *Table 26, p. 58*

Headstart programs.—Under the Economic Opportunity Act, grants may be made to local community action agencies or other public and private nonprofit agencies for up to 80 percent of the cost of Headstart programs. Under these programs, comprehensive health, nutrition, education, social, and other services are provided to preschool age children. The law requires that ninety percent of the Headstart enrollees come from poor families.

Most of the $324 million spent in fiscal year 1970 paid for part day and summer Headstart programs, but $107 million was used for full day programs for 89,000 children. The Department of Health, Education, and Welfare estimates that the number of children enrolled in full day programs will remain at this level in fiscal years 1971 and 1972. About one-third of the mothers of children in full-day Headstart programs are employed. *Table 27, pp. 59–60*

The Federal cost of full day Headstart averaged $1,200 per child in fiscal year 1970, with most States within a $1,000–$1,600 range.

Income Tax Deduction for Child Care Expenses

Under present law a woman taxpayer is eligible for a tax deduction for child care expenses if the child care is necessary in order for her to work. The deduction is limited to $600 if the woman has one child and to $900 if she has two or more children. If a woman is married and if the family income exceeds $6,000, the limitation on the deduction is reduced $1 for each dollar by which family income exceeds $6,000. Thus, for example, if family income is $6,500, the deduction may not exceed $100 if there is one child or $400 if there is more than one child.

Table 28, p. 60 In 1966, the most recent year for which information is available, $131 million was deducted for child care expenses on 245,000 tax returns, an average of $515 per return.

Training of Child Care Personnel

Table 29, p. 61 Though no one Federal program has placed primary emphasis on training people to work in child care, a number of Federal programs have provided partial support for this kind of training.

The Social Security Act (Section 426) authorizes grants to institutes of higher learning to train people to work in the field of child welfare, including child care. The funds may be used for teaching grants, traineeships or short-term training activities. In fiscal year 1970, about 1,500 persons received training in child welfare under this program, most of them at the graduate study level. It is not known how many of them received training particularly related to providing child care.

Under the Education Professions Development Act, the Office of Education provides support for projects to train and retrain persons to work in programs for children ages 3 to 9. In fiscal year 1970, about 4,600 persons were trained: 2,000 teachers with bachelor's degrees received training in early childhood education; 1,500 administrators, teacher trainers, and trainers of teacher trainers; and 1,100 teacher aides.

Another 1,000 persons received training as kindergarten aides under the Office of Education's Follow Through program from fiscal year 1970 funds.

Under the Headstart program in fiscal year 1970, 7,000 Headstart employees (mostly nonprofessional) were enrolled in college level courses related to child development and earning credit toward undergraduate degrees. Over 2,000 employees are expected to receive the Associate in Arts degree by June 1971. Another 60,000 employees participated in short orientation and inservice training programs during the summer, many of them public school teachers and assistants. Leadership development programs of 6 to 8 weeks of intensive child development skill training were offered to 2,000 persons.

The Labor Department's manpower programs offer training in several occupational areas related to child care services. In fiscal year 1970, these programs trained 150 child care attendants, 15 kindergartners, 155 nursery school teachers, 1,110 nursemaids (persons who attend children in private homes), and 100 mothers' helpers (combination maid-child attendants).

Research and Demonstrations

Research and demonstrations in the area of child care may be supported under the Social Security Act (section 426). Under this program, grants are made to public or other nonprofit organizations of higher learning and other public or nonprofit agencies and organizations engaged in research in child welfare activities, including child care.

Child care research and demonstration projects have also been supported by the Office of Child Development, the Office of Education, and the Office of Economic Opportunity.

How Much Does Child Care Cost?

In 1967, there was prepared in the Department of Health, Education, and Welfare an analysis of child care costs based on three different levels of quality: *minimum* (defined as "the level essential to maintaining the health and safety of the child, but with relatively little attention to his developmental needs"); *acceptable* (defined as including "a basic program of developmental activities as well as providing minimum custodial care"), and *desirable* (defined as including "the full-range of general and specialized developmental activities suitable to individualized development"). *Appendix G, pp. 130–137*

For full-day care in a child care center, the cost per child is estimated at $1,245 (minimum), $1,862 (acceptable) and $2,320 (desirable). Care in a family day-care home, primarily for infants under age 3, is estimated at $1,423 (minimum), $2,032 (acceptable), and $2,372 (desirable). For school-age children the cost of before-and-after-school and summer care is projected at $310 (minimum) and $653 (acceptable and desirable). The most significant item accounting for the difference in cost between the different levels of quality is the cost of additional staff. The analysis notes that costs vary in different parts of the country.

In a report to the Office of Economic Opportunity entitled *A Study in Child Care 1970–1971,* Abt Associates prepared plans for quality child care centers in which they associated an annual cost of $2,349 per child for a center with average daily attendance of 25 children; $2,223 for a 50-child center; and $2,189 for a 75-child center. *Appendix H, pp. 138–146*

Working mothers actually pay far less than these amounts for child care. In 1965, the Children's Bureau-Women's Bureau study showed that 74 percent of all children whose mothers worked full time received free care—usually in their own home by a member of their family or relative. Only 10 percent of the children were *Table 30, pp. 62–63* in child care arrangements costing their mothers more than $500 annually.

Table 31, p. 64 In its 1970 survey of working mothers with family income of less than $8,000 using full day child care, the Westinghouse Learning Corporation similarly found that 70 percent of the children received care at little or no cost to the mother—again, mostly in their own homes. Six percent of the children were in child care arrangements costing the mother more than $650 annually.

Since both of these surveys deal only with cost to the mother, the actual cost of providing the care might be higher, with mothers receiving some form of subsidy if the Federal Government or some organization pays the portion of the cost of care not borne by the mother.

Table 13, pp. 32–33 Child care costs under the Social Security Act in 1970 averaged $428 per child under the Work Incentive Program and $315 per child when the cost of care was reimbursed through the welfare payment; in both of these cases the mother usually arranged for child care herself. When the care was paid for directly by the welfare agency (and usually arranged for by the agency), the cost averaged $1,140.

Table 27, pp. 59–60 The Federal cost of full day child care under the Headstart program averaged $1,200 in fiscal year 1970, with most States averaging between $1,000 and $1,600. The Federal share may not exceed 80 percent of the total cost of the program, but the non-Federal share may be in kind as well as in cash and much of it represents donated time, space, or use of equipment.

In its survey of twenty quality child care center programs, Abt Associates found that cash costs ranged from $463 to $3,433 per child-year of care, with the average for all centers $1,855. These figures relate to the average daily attendance; average cost per child enrolled would be about 12 percent lower ($1,632). In addition, most centers utilized in-kind free services, space or equipment usually representing from 25 to 50 percent of total estimated cost. Only five of the 20 child care center programs received more than 10 percent of cash costs from fees paid by parents; 13 of the 20 received Federal, State, or local subsidies amounting to at least 50 percent of cash costs.

The major cost item in all 20 programs in the Abt Associates survey was personnel; personnel costs generally represented about 75 to 80 percent of total cost. It is for this reason that the major difference between the costs of different child care programs is most likely to be a reflection of the number of children per staff member.

Barriers to Expansion of Child Care

Appendix E, pp. 108–126

Appendix F, pp. 127–129

The Auerbach Corporation in its study of child care under the Work Incentive Program outlines several barriers to the expansion of child care services for working mothers under the Social Security Act, and these are reiterated in the 1970 report of the Department of Health, Education, and Welfare on child care services under the Work Incentive Program. The barriers cited include lack of State and local funds; lack of Federal funds for construction or major renovation of day care facilities; inadequate levels of public welfare agency payments for child care; shortage of staff in public welfare agencies; shortage of trained child care personnel; and Federal, State, and local standards which are often believed to be unrealistic.

Lack of State and local funds.—The Social Security Act requires a 25 percent non-Federal share for child care costs. The Department of Health, Education, and Welfare has cited this as an obstacle to expansion of child care services under the Act.

Lack of Federal funds for construction or major renovations.—In many cities, local ordinances make it extremely difficult or impossible to utilize existing facilities as child care centers, and this has helped generate pressure for Federal construction grants. This is discussed in greater detail below.

Inadequate levels of public welfare agency payments.—Some States limit what they will pay for child care services for welfare mothers to amounts so low as to be able to purchase only very inexpensive care in family day care homes or care provided by relatives. Often, such arrangements prove to be unstable, requiring a mother to miss work or even leading to loss of her job.

Table 32, p. 65

Shortage of staff in public welfare agencies.—Statistics prepared by the Department of Health, Education, and Welfare show that in 1969 there were only about 1,000 full-time and part-time professional employees in the day care programs of State and local public welfare agencies. About 40 percent of the total were in four States (New York, New Jersey, Maryland, and Texas), with another 20 percent in five other States (Illinois, Indiana, Missouri, California, and Arkansas). Ten States have no professional staff in the child care area, while 8 have one, two, or three such specialists.

Shortage of trained child care personnel.—There is little information on the number of persons in the United States who have been trained as professionals or aides in the areas of child development, early childhood education, or child care. No Federal training support programs are specifically designated to train child care personnel; the Headstart program has provided training to its own employees. In addition, there is a lack of trained personnel to plan and direct the development to new child care resources.

The Auerbach report on child care under the Work Incentive Program concluded that lack of trained staff represented the greatest single barrier to the expansion of child care: "Any significant increase in child care facilities will readily show up the lack of trained staff. Directors and head teachers are so scarce that problems of financing and licensing would seem small next to lack of staff. . . . As the situation now stands, the number of graduates from Early Childhood Education (Child Development Nursery School Management, or whatever name it is given), who have also had a few years experience and could therefore qualify as head teachers and directors, is too small to meet the present need, much less any expansion in the number of facilities."

Appendix I, pp. 147–156

Federal child care standards.—On September 23, 1968, the Department of Health, Education, and Welfare published the "Federal Interagency Day Care Requirements" which day care programs were required to meet in order to receive Federal matching under the Social Security Act (and other Federal programs). In its report on child care under the Work Incentive Program, the Department of Health, Education, and Welfare comments that "some agencies believe the Federal Interagency Day Care Standards are unrealistic." In particular, the Federal standards for day care centers require one adult for every 5 children 3 to 4 years old, and one adult for every 7 children 4 to 6 years old. Since staffing costs represent 75 to 80 percent of child care center costs, and since more staff is required under the Federal standards than under the licensing requirements of almost all States, federally shared child care costs may be expected to become rather higher than present costs in the States. The Auerbach report on child care under the Work Incentive Program noted that "it has been estimated that to comply with the Federal Interagency Day Care Standards . . . would cost over $2,000 a year per child. This is more than can be paid by local agencies."

State licensing requirements: health and safety.—The Department of Health, Education, and Welfare comments in its report on WIN child care that "local building codes and fire and welfare ordinances often make development of day care centers difficult, especially in inner city areas where many AFDC mothers live." The Auerbach report similarly states that "the greatest stated problem [concerning physical facilities] is in meeting the various local ordinances which, according to some staffs, are prohibitive. Some examples are: windows no more than "x" feet from the floor, sanitation facilities for children, appropriately scaled, sprinkler systems, fireproof construction, etc."

The problem is also commented on in a report entitled "Day Care Centers—The Case For Prompt Expansion" which explains why day care facilities and programs in New York City have lagged greatly behind the demand for them:

> The City's Health Code governs all aspects of day care center operations and activities. Few sections of the Code are more detailed and complex than those which set forth standards for day care centers. The applicable sections are extremely detailed, contain over 7,000 words of text and an equal volume of footnotes, and stretch over two articles and twenty printed pages.
>
> The provisions of the City's Health Code that apply to day care center facilities constitute the greatest single obstacle to development of new day care center facilities. The highly detailed, and sometimes very difficult-to-meet, specifications for day care facilities inhibit the development of new facilities. Obviously there must be certain minimum fire, health, and safety standards for the protection of children in day care centers. The provisions of the Health Code go far beyond this point. Indeed, some sections of the Code are a welter of complex detail that encourages inflexibility in interpretation and discourages compliance.
>
> Legally, only those centers that conform to the Health Code may be licensed. Faced with Health Code requirements of such detail, personnel of the Divisions concerned in the Department of Health and in the Department of Social Services have had to choose between considering the regulations as prerequisites to the licensing of new day care centers or merely as goals toward which to work.
>
> In general, the choice is made in favor of strict interpretation notwithstanding the fact that this severely handicaps the efforts of groups attempting to form centers in substandard areas.

Other State licensing requirements.—Other State licensing requirements relate to staff and facilities of child care centers; States vary widely in their requirements.

In most States, it is the welfare agency that has responsibility for licensing of child care centers. Generally, any center providing care to at least four preschool-age children must be licensed; in a number of States, infants under 2 or 3 years old may not receive care in a group care center.

Table 33, pp. 66–69

Table 34, pp. 70–72 State requirements on child care center staffing generally depend on the age of the children. For children age 3 or 4 years, States typically require one adult for every 10 children; for children age 4 to 6 years, one adult for every 10 to 15 children; and for children of school age, one adult for every 15 to 25 children.

Table 35, pp. 73–75 States usually explicitly or implicitly require child care center directors to be at least 21 years of age, with either experience in child care or educational preparation at the college level in child development or early childhood education. Lesser qualifications, if any, are required of other staff of the child care center. Both initial and annual physical examinations are required of center personnel in most States.

Table 36, pp. 76–78 In addition to State and local fire, health, zoning, safety, and sanitation requirements, most States require child care centers to provide at least 35 square feet of indoor space per child and 75 feet of outdoor play space; an isolation room or area must be available for children who become ill; and special provision must be made for the children's naps.

Table 37, pp. 79–82 State licensing requirements for family day care homes usually set an upper limit of 5 or 6 children (including the children of the operator), with a separate limit of not more than 2 children under age 2. Facility requirements generally include provisions for isolating sick children and adequate provision for the children's naps.

TABLES

TABLE 1.—LABOR FORCE PARTICIPATION RATES OF MOTHERS, SELECTED YEARS

[In percent]

	All mothers	Mothers with children under 6 years	Mothers with children 6 to 17 years only
Percentage of mothers participating in the labor force:			
1950	22	14	33
1960	30	20	43
1964	34	25	46
1967	38	29	49
1970	42	32	52

Source: Department of Labor, Women's Bureau Bulletin 296, 1971, pp. 2–3.

TABLE 2.—NUMBER OF MARRIED AND FORMERLY MARRIED WOMEN WITH MINOR CHILDREN IN THE POPULATION AND IN THE LABOR FORCE, MARCH 1969

	With children under 6 years	With children 6 to 17 years only
Women in the total population:		
Married, husband present	12,617,000	12,650,000
Divorced	339,000	619,000
Husband absent	782,000	679,000
Widowed	145,000	590,000
Total	13,883,000	14,538,000
Women in the labor force:		
Married, husband present	3,596,000	6,146,000
Divorced	231,000	497,000
Husband absent	346,000	419,000
Widowed	50,000	314,000
Total	4,223,000	7,376,000
Percent of women participating in the labor force:		
Married, husband present	29	49
Divorced	68	80
Husband absent	44	62
Widowed	34	53
All married and formerly married mothers	30	51

Source: Based on Elizabeth Waldman, "Marital and Family Characteristics of the U.S. Labor Force" *Monthly Labor Review,* May 1970, table 3, p. 23 (Department of Labor, Bureau of Labor Statistics).

TABLE 3.—NUMBER OF MARRIED WOMEN WITH MINOR CHILDREN IN THE POPULATION AND IN THE LABOR FORCE, BY YEARS OF SCHOOL COMPLETED, MARCH 1969

	With children under 6 years	With children 6 to 17 years only
Women in the labor force:		
Less than 4 years of high school..	1,030,000	2,070,000
4 years of high school.............	1,790,000	2,950,000
1 to 3 years of college.............	420,000	570,000
4 years or more of college........	360,000	560,000
Total............................	3,600,000	6,150,000
Percent of women participating in the labor force:		
Less than 4 years of high school..	27	47
4 years of high school.............	29	50
1 to 3 years of college.............	29	44
4 years or more of college........	32	56
All women participating in the labor force.....................	28	49

Source: Based on Elizabeth Waldman, "Marital and Family Characteristics of the U.S. Labor Force," *Monthly Labor Review*, May 1970, table 3, p. 23 (Department of Labor, Bureau of Labor Statistics).

TABLE 4.—FAMILIES RECEIVING AID TO FAMILIES WITH DEPENDENT CHILDREN, BY AGE GROUP OF YOUNGEST CHILD IN FAMILY

	December 1967		Number of families in December 1970 (projecting same percentages)
	Number of families	Percent of families	
Youngest child under age 6..	768,000	60	1,531,000
Youngest child between ages 6 and 12.............	354,000	28	715,000
Youngest child above age 12.........................	156,000	12	306,000
Total, all families.....	1,278,000	100	2,552,000

Source: Based on Department of Health, Education, and Welfare, Social and Rehabilitation Service, "Findings of the 1967 AFDC Study", NCSS Report AFDC-3 (67), pt. I, table 55, and "Advance Copy of Selected Tables from Public Assistance Statistics," December 1970.

TABLE 5.—CHILDREN RECEIVING AID TO FAMILIES WITH DEPENDENT CHILDREN, BY AGE GROUP

	December 1967		Number of children in December 1970 (projecting same percentages)
	Number of children	Percent of total	
Below age 6	1,389,000	33	2,321,000
Ages 6 to 12	1,726,000	41	2,883,000
Above age 12	1,066,000	26	1,828,000
Total	4,180,000	100	7,032,000

Source: Based on Department of Health, Education, and Welfare, Social and Rehabilitation Service, "Findings of the 1967 AFDC Study," NCSS Report AFDC-3 (67), pt. I, table 53, and "Advance Copy of Selected Tables From Public Assistance Statistics," December 1970.

TABLE 6.—CHILD CARE ARRANGEMENTS FOR CHILDREN OF MOTHERS WORKING FULL TIME, 1965

	Total		Children under 6		Children 6 to 13	
	Number	Percent	Number	Percent	Number	Percent
1. Total Number of Children	8,315,000	100.0	2,561,000	100.0	5,753,000	100.0
2. Cared for in own home by—						
(a) Father	1,145,000	13.8	264,000	10.3	881,000	15.3
(b) Other relative	2,013,000	24.2	472,000	18.4	1,520,000	26.4
(Under 16 years old)	(397,000)	(4.7)	(25,000)	(1.0)	(372,000)	(6.5)
(16 years and over)	(1,615,000)	(19.5)	(446,000)	(17.4)	(1,149,000)	(20.0)
(c) Nonrelative who only looked after children	429,000	5.2	238,000	9.3	188,000	3.3
(d) Nonrelative who usually did additional household chores	513,000	6.2	236,000	9.2	281,000	4.9
(e) Subtotal, children cared for in own home	4,099,000	49.3	1,209,000	47.2	2,871,000	49.9

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3. Cared for in someone else's home by—						
(a) Relative	801,000	9.6	452,000	17.6	354,000	6.2
(b) Nonrelative	836,000	10.1	502,000	19.6	341,000	5.9
(c) Subtotal, children cared for in someone else's home	1,637,000	19.7	954,000	37.3	695,000	12.1
4. Other arrangements:						
(a) Care in group care center	239,000	2.9	197,000	7.7	41,000	.7
(b) Child looked after self	800,000	9.6	7,000	.3	794,000	13.8
(c) Mother looked after child while working	575,000	6.9	171,000	6.7	407,000	7.1
(d) Mother worked only during child's school hours	917,000	11.0	12,000	.5	906,000	15.7
(e) Other	50,000	.6	10,000	.4	40,000	.7

Source: Seth Low and Pearl G. Spindler, "Child Care Arrangements of Working Mothers in the United States," Children's Bureau Publication 461-1968, tables A-2 and A-3, page 71.

TABLE 7.—NUMBER AND CAPACITY OF LICENSED OR APPROVED DAY CARE CENTERS AND FAMILY DAY CARE HOMES, 1967–1969

	March 1967	March 1968	March 1969
Number of centers and homes:			
Day care centers	10,400	11,700	13,600
Family day care homes	24,300	27,400	32,700
Total	34,700	39,100	46,300
Capacity of centers and homes:			
Day care centers:			
Public	22,600	27,700	34,700
Voluntary	113,900	139,000	177,900
Independent	239,300	231,000	266,400
Auspices not reported	17,500	40,100	38,900
Subtotal	393,300	437,800	517,900
Family day care homes:			
Public	2,500	3,600	8,000
Voluntary	1,300	2,200	2,200
Independent	63,900	84,600	101,900
Auspices not reported	14,200	6,800	8,300
Subtotal	81,900	97,200	120,400
Total capacity	475,200	535,000	638,300

Source: Department of Health, Education, and Welfare, Social and Rehabilitation Service, *Child Welfare Statistics 1967* (table 13, p. 24); *1968* (NCSS Report CW-1, table 18, p. 27); and *1969* (NCSS Report CW-1, table 18, p. 28).

TABLE 8.—NUMBER AND CAPACITY OF LICENSED OR APPROVED DAY CARE CENTERS AND FAMILY DAY CARE HOMES, BY STATE, MARCH 1969

	Day care centers		Family day care homes		
	Number	Capacity	Number	Capacity	Total capacity
Alabama	240	9,700	280	1,400	11,100
Alaska	14	430	60	160	590
Arizona	340	15,600	320	710	16,300
Arkansas	98	3,600	220	930	4,500
California	2,200	97,000	10,000	38,500	135,500
Colorado [1]	320	10,000	820	2,900	12,900
Connecticut	370	9,700	610	1,700	11,400
Delaware	59	2,400	120	230	2,600
District of Columbia	150	6,000	260	650	6,600
Florida	360	21,300	160	730	22,000
Georgia	680	27,400	110	650	28,000
Hawaii	150	7,600	120	530	8,100
Idaho	18	560	100	270	830
Illinois	410	17,000	1,900	6,100	23,100
Indiana	59	2,400	900	4,000	6,400
Iowa	98	3,200	620	2,300	5,500
Kansas	130	2,800	900	3,500	6,300
Kentucky	300	7,500	15	90	7,600

See footnotes at end of table.

TABLE 8.—NUMBER AND CAPACITY OF LICENSED OR APPROVED DAY CARE CENTERS AND FAMILY DAY CARE HOMES, BY STATE, MARCH 1969—Continued

	Day care centers		Family day care homes		
	Number	Capacity	Number	Capacity	Total capacity
Louisiana	220	6,700	290	1,200	7,900
Maine	21	990	35	200	1,200
Maryland	760	29,600	810	2,900	32,500
Massachusetts	120	3,900	....	....	3,900
Michigan	360	18,400	1,900	5,700	24,100
Minnesota	61	1,900	1,900	5,700	7,600
Mississippi	7	200	4	17	220
Missouri	270	10,400	210	1,000	11,400
Montana	24	790	140	540	1,330
Nebraska	36	990	110	620	1,610
Nevada	44	2,000	220	870	2,900
New Hampshire	130	3,900	260	920	4,800
New Jersey	490	15,300	130	300	15,600
New Mexico	26	670	[2] 37	[2] 92	[2] 760
New York	440	19,900	1,300	4,200	24,100
North Carolina	330	12,200	34	180	12,400
North Dakota	9	200	19	51	250

Ohio	95	3,500	63	200	3,700
Oklahoma [1]	400	9,300	180	640	9,900
Oregon	150	4,500	6	31	4,500
Pennsylvania	220	7,200	920	3,400	10,600
Puerto Rico	160	5,600	110	600	6,200
Rhode Island	22	1,100	70	240	1,300
South Carolina	190	7,600	150	1,800	9,400
South Dakota	2	65	26	75	140
Tennessee	680	24,400	150	1,000	25,400
Texas	1,600	56,700	1,200	5,800	62,500
Utah	65	2,600	270	840	3,400
Vermont	29	690	29	250	940
Virgin Islands	12	290	1	6	300
Virginia	240	11,300	550	2,000	13,300
Washington	130	5,400	4,000	13,500	18,900
West Virginia	33	760	30	89	850
Wisconsin	150	3,900			3,900
Wyoming	34	760	71	100	860
Total	13,600	517,900	32,700	120,400	638,300

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[1] 1968 data.
[2] Incomplete.

Source: Department of Health, Education, and Welfare, Social and Rehabilitation Service, NCSS Report CW-1 (69), *Child Welfare Statistics, 1969*, table 18, p. 28.

TABLE 9.—ESTIMATED PERCENTAGE DISTRIBUTION OF DAY CARE CENTERS[1] BY OPERATING AGENCY

	Percent of total
United fund and community agencies	8.4
Community action agency	11.2
Church	17.6
Welfare department	2.9
Private companies	57.9
Other	2.0
Total	100.0

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[1] With full-day enrollment of 7 or more children.

Source: Westinghouse Learning Corporation, *Day Care Survey 1970: Summary Report and Basic Analysis*, Table 2.12, page 40.

TABLE 10.—ESTIMATED PERCENTAGE DISTRIBUTION OF DAY CARE CENTERS[1] BY KIND OF BUILDING IN WHICH CENTER IS LOCATED

	Percent of total
Single dwelling unit	39.0
Duplex dwelling unit	1.5
Apartment building	1.8
Building for day care	21.9
Church	22.2
Community center	3.6
Store front	1.5
Public housing	1.7
School	3.3
Other	3.5
Total	100.0

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[1] With full-day enrollment of 7 or more children.

Source: Westinghouse Learning Corporation, *Day Care Survey 1970: Summary Report and Basic Analysis*, Table 2.18, page 45.

TABLE 11.—ESTIMATED PERCENTAGE DISTRIBUTION OF PARENTS WITH CHILDREN IN DAY CARE CENTERS[1] BY ANNUAL FAMILY INCOME

Annual family income	Percent in— Proprietary facilities	Nonproprietary facilities	All facilities
Less than $2,000	1.8	16.3	7.8
$2,000 to $3,999	7.7	36.9	19.7
$4,000 to $5,999	18.5	25.0	21.2
$6,000 to $7,999	22.7	11.2	17.9
$8,000 to $9,999	25.2	5.3	17.0
$10,000 or more	24.1	5.3	16.4

[1] With full-day enrollment of 7 or more children.

Source: Westinghouse Learning Corporation, *Day Care Survey 1970: Summary Report and Basic Analysis,* Table 2.57, page 82.

TABLE 12.—ESTIMATED PERCENTAGE DISTRIBUTION OF DAY CARE CENTERS[1] PROVIDING BEFORE AND AFTER SCHOOL CARE FOR SCHOOL-AGE CHILDREN

	Percent of total
Centers offering no care for school-age children	43.7
Centers offering care for school-age children:	
Before school only	10.2
After school only	33.6
Before and after school	29.3

[1] With full-time enrollment of 7 or more children.

Source: Westinghouse Learning Corporation, *Day Care Survey 1970: Summary Report and Basic Analysis,* table 2.31, page 57.

TABLE 13.—ESTIMATED PROGRAM LEVEL AND COST OF CHILD CARE PROGRAMS UNDER TITLE IV–A OF THE SOCIAL SECURITY ACT—FISCAL YEARS 1970, 1971, AND 1972[1]

Program and estimated child care years	Annual cost per child			Federal cost (thousands)	Total cost (thousands)
	Total	Federal	State		
Fiscal year 1970:					
Work incentive program (57,000)	$428	$321	$107	$18,457	$24,610
AFDC—Social services (111,847)[2]	1,140	855	285	95,604	127,473
AFDC—Income disregard (264,550)[3]	315	189	126	50,000	83,333
Total (433,879)[4]	542	378	164	163,914	235,416
Fiscal year 1971:					
Work incentive program (117,162)	461	346	115	40,589	54,012
AFDC—Social services (197,479)[2]	1,385	1,039	346	205,199	273,508
AFDC—Income disregard (300,000)[3]	330	198	152	59,400	99,000
Total (614,641)[4]	694	496	198	305,188	426,520
Fiscal year 1972:					
Work incentive program (200,000)	520	390	130	78,000	104,000
AFDC—Social services (291,972)[2]	1,365	1,024	341	298,787	398,542
AFDC—Income disregard (342,000)[3]	346	208	138	71,136	118,332
Total (833,972)[4]	744	537	207	447,923	620,874

[1] All data on these tables are estimated except data for the fiscal year 1970 Work Incentive Program. Estimates for IV-A social services and income disregard are based on estimates obtained from our regional offices on a request for information made in November 1970.

[2] These are children of AFDC mothers with training and employment outside of the Work Incentive Program whose care was financed through IV-A social service funds.

[3] These are children of employed AFDC mothers whose care is financed in part by disregard of earned income for child care costs. This in effect raises the amount of the welfare payment the mother would be eligible for and Federal sharing would be reflected in the cash assistance funds rather than social service funds.

[4] Some duplication in child care years exists between AFDC social services and AFDC income disregard due to some women receiving child care supplementation from both sources. We do not know to what extent this happens but estimate on unit costs eliminates any duplication.

QUALIFICATIONS OF ESTIMATES AND DATA

Work Incentive Program.—Estimates for Fiscal years 1971 and 1972 are based upon trends established from data submitted on the SRS–CB–9—"Quarterly Expenditure Report." Reported costs on Work Incentive Program child care continue to be lower than what we believe child care costs would be. We believe this is due in part to States not charging administrative and medical costs of child care to Work Incentive Program. Another factor may be caused by a count of Work Incentive Program children in care in agency facilities for which no charge is made against Work Incentive Program funds.

AFDC–Social Services.—Estimates are based upon information submitted by States via our Regional offices. Sufficient data for estimating unit costs was provided by only 42 States. Several large States (Ill., Ohio, N.J.) were among the States without sufficient data. The assumption was made that these States had child care costs that averaged higher than the States included in the sample. This was taken into consideration in estimating unit costs. There is no required reporting on IV–A child care but Community Services Administration, HEW, is currently developing reporting requirements.

AFDC–Income Disregard.—Estimates for only 21 States for Fiscal year 1970 and 22 for Fiscal years 1971 and 1972 were available. This narrow base limits the reliability of estimates for income disregard. Many States have no base for estimating the amount of income disregard. There is currently no required reporting on income disregard and such costs are included in the maintenance assistance costs.

Source: Department of Health, Education, and Welfare, Social and Rehabilitation Service.

TABLE 14.—SOCIAL SERVICES UNDER TITLE IV, PART A OF THE SOCIAL SECURITY ACT: CHILD CARE—FEDERAL SHARE OF COSTS, AVERAGE NUMBER OF CHILDREN, AND AVERAGE COST PER CHILD—FISCAL YEARS 1970, 1971, AND 1972 (EXCLUDING CHILD CARE UNDER THE WORK INCENTIVE PROGRAM) [1]

State	Federal share of costs (fiscal year)—			Average number of children in care (fiscal year)—			Average annual cost per child (fiscal year)—		
	1970	1971	1972	1970	1971	1972	1970	1971	1972
All States	$95,604,511	$205,199,360	$298,786,790	111,847	197,479	291,972	$855	$1,039	$1,024
Alabama	444,000	2,625,000	3,375,000	1,007	3,500	4,500	441	750	750
Alaska	(200,000)	276,375	276,375	(769)	1,040	1,040	(260)	266	266
Arizona	152,850	831,162	883,200	593	2,211	2,356	257	375	374
Arkansas	(300,000)	739,977	1,034,111	(789)	(1,947)	(2,298)	(380)	(380)	(450)
California	23,844,267	32,266,550	34,533,252	21,155	26,608	32,112	1,127	1,212	1,075
Colorado	1,375,750	2,520,558	5,938,146	1,949	3,403	7,705	706	741	771
Connecticut	1,154,218	2,175,000	2,542,500	1,536	2,927	3,366	751	743	755
Delaware	158,645	1,290,000	1,800,000	176	1,246	1,515	901	1,035	1,188
District of Columbia	(1,900,000)	(2,400,000)	(2,800,000)	(1,727)	(2,181)	(2,333)	(1,100)	(1,100)	(1,200)
Florida	91,328	1,116,750	3,824,250	55	1,155	4,855	1,661	967	788
Georgia	0	8,283,192	9,114,321	0	(5,176)	(5,696)	0	(1,600)	(1,600)
Hawaii	40,500	45,000	45,000	139	158	158	291	284	284
Idaho	3,761	10,116	13,500	56	112	150	67	90	90
Illinois	4,997,267	6,600,000	11,250,000	(4,542)	(6,000)	(9,375)	(1,100)	(1,100)	(1,200)
Indiana	37,790	1,015,156	3,854,824	(42)	(1,127)	(3,504)	(900)	(900)	(1,100)
Iowa	104,335	946,000	1,051,500	162	683	749	644	1,385	1,404
Kansas	0	150,000	225,000	0	240	360	0	625	625
Kentucky	0	3,835,000	5,610,000	0	2,560	2,850	0	1,498	1,968
Louisiana	513,406	827,925	1,572,750	1,551	2,480	4,090	331	334	385
Maine	512,620	1,054,316	1,202,850	450	600	1,250	1,139	1,757	962
Maryland	992,577	2,513,795	5,042,292	1,084	2,316	4,174	916	1,085	1,208

Massachusetts	4,125,000	7,800,000	10,575,000	1,500	5,000	7,000	2,750	1,560	1,511
Michigan	5,700,000	10,500,000	13,900,000	16,000	21,000	32,000	356	500	434
Minnesota	83,931	150,000	187,500	(140)	(250)	(234)	(600)	(600)	(800)
Mississippi	32,500	315,000	585,000	70	670	1,267	464	470	462
Missouri	470,839	3,848,945	7,210,617	902	3,149	5,267	522	1,222	1,369
Montana	90,000	180,000	180,000	226	550	550	398	327	327
Nebraska	502,109	1,472,000	1,874,000	304	493	567	1,652	2,986	3,305
Nevada	0	0	0	0	0	0	0	0	0
New Hampshire	(668,991)	735,000	640,843	(1,070)	(1,176)	1,000	(625)	(625)	641
New Jersey	10,791,511	15,206,609	24,154,939	(5,995)	(7,603)	(10,979)	(1,800)	(2,000)	(2,200)
New Mexico	(345,000)	756,000	1,050,000	(1,150)	1,900	2,600	(300)	398	404
New York	13,189,500	27,864,000	33,897,000	21,300	29,850	36,700	619	933	924
North Carolina	559,662	671,556	805,868	349	419	503	1,604	1,603	1,602
North Dakota	52,500	74,000	90,000	900	1,100	1,350	58	67	67
Ohio	(6,500,000)	(7,800,000)	(8,000,000)	(5,909)	(7,090)	(6,666)	(1,100)	(1,100)	(1,200)
Oklahoma	0	1,460,250	1,565,100	0	3,828	4,083	0	381	383
Oregon	237,215	1,039,215	2,065,351	(878)	3,500	6,000	(270)	297	344
Pennsylvania	2,860,004	27,300,000	37,500,000	2,125	12,750	17,400	1,346	2,141	2,155
Rhode Island	464,740	577,494	946,316	453	535	725	1,026	1,079	1,258
South Carolina	0	3,764,067	4,225,000	0	2,595	2,750	0	1,451	1,536
South Dakota	187,908	295,481	400,500	850	1,125	1,486	221	263	270
Tennessee	3,150,000	6,300,000	8,775,000	2,525	4,750	6,585	1,247	1,326	1,332
Texas	579,468	3,603,600	28,130,464	1,260	5,200	28,000	460	693	1,005
Utah	246,861	162,045	178,245	517	532	600	477	305	297
Vermont	(900,000)	1,050,000	1,350,000	(1,000)	(1,166)	(1,350)	(900)	(900)	(1,000)
Virginia	18,469	543,750	930,000	68	1,300	3,800	293	418	245
Washington	1,039,132	1,695,488	4,007,691	2,309	3,768	8,906	450	450	450
West Virginia	44,200	90,000	112,500	255	300	350	173	300	321
Wisconsin	5,925,000	8,403,000	9,436,000	(5,642)	(8,002)	(8,578)	(1,050)	(1,050)	(1,100)
Wyoming	16,657	19,988	24,985	178	208	213	96	96	117

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[1] Estimates made by States via HEW regional offices during winter 1970 except numbers in parentheses were estimated in central office from available data.

Source: Department of Health, Education, and Welfare, Social and Rehabilitation Service.

TABLE 15.—CHILD CARE PROVIDED UNDER CHILD WELFARE SERVICES PROGRAM (TITLE IV-B OF THE SOCIAL SECURITY ACT)

	Fiscal year 1968	Fiscal year 1969
Number of children provided day care on December 31, at middle of fiscal year:		
In day care centers	14,600	16,700
In family day care homes	4,400	5,900
Total	19,000	22,600
Expenditures for day care (in millions)	$14.7	$20.8

Source: Department of Health, Education, and Welfare, Social and Rehabilitation Service, "Child Welfare Statistics" 1968 and 1969 (NCSS Report CW-1), tables 6 and 32.

TABLE 16.—ESTIMATED AVERAGE NUMBER OF CHILDREN IN DAY CARE UNDER CHILD WELFARE SERVICES PROGRAMS (TITLE IV-B OF THE SOCIAL SECURITY ACT)

	Average number of children in care (fiscal year)	
	1967	1968
Alabama	610	663
Alaska	299	325
Arizona	386	420
Arkansas	225	245
California	1,196	1,300
Colorado	42	46
Connecticut	64	70
Delaware	235	255
District of Columbia	621	675
Florida	(1)	(1)
Georgia	152	165
Hawaii	59	64
Idaho	0	0
Illinois	248	270
Indiana	166	180
Iowa	40	43
Kansas	179	195
Kentucky	110	120
Louisiana	1,196	1,300
Maine	(1)	(1)
Maryland	446	485
Massachusetts	0	0
Michigan	(1)	(1)
Minnesota	207	225
Mississippi	9	10
Missouri	317	345
Montana	77	84
Nebraska	51	55
Nevada	0	0
New Hampshire	3	3
New Jersey	336	365
New Mexico	101	110
New York	7,314	7,950
North Carolina	(1)	(1)
North Dakota	19	21

TABLE 16.—ESTIMATED AVERAGE NUMBER OF CHILDREN IN DAY CARE UNDER CHILD WELFARE SERVICES PROGRAMS (TITLE IV-B OF THE SOCIAL SECURITY ACT)—Continued

	Average number of children in care (fiscal year)	
	1967	1968
Ohio	235	255
Oklahoma	285	310
Oregon	11	12
Pennsylvania	1,196	1,300
Rhode Island	30	33
South Carolina	0	0
South Dakota	19	21
Tennessee	99	108
Texas	711	773
Utah	382	415
Vermont	0	0
Virginia	37	40
Washington	138	150
West Virginia	46	50
Wisconsin	823	895
Wyoming	4	4
Guam	0	0
Puerto Rico	106	115
Virgin Islands	120	130
Total	18,950	20,600

[1] Not reported.

Note: Estimates based on data for the month of March 1970 indicate that day care under the Child Welfare Services program has stabilized at slightly below the fiscal year 1968 level. Estimates of average number of children in care for fiscal years 1970 and 1971 are 20,000 in each year.

Source: Department of Health, Education, and Welfare, Social and Rehabilitation Service.

TABLE 17.—NUMBER OF CHILDREN REPORTED RECEIVING CHILD CARE UNDER THE WORK INCENTIVE PROGRAM

	Last day of—				
	December 1969	March 1970	June 1970	September 1970	December 1970
Alabama	1,200	1,400	1,900	2,200	2,200
Alaska	370	470	300	380	340
Arizona	(1)	(1)	(1)	(1)	(1)
Arkansas	650	1,000	1,200	1,600	1,900
California	(1)	(1)	(1)	6,100	6,700
Colorado	1,200	2,300	2,700	3,100	3,200
Connecticut	1,500	1,800	1,600	1,800	2,100
Delaware	(1)	(1)	740	720	770
District of Columbia	(1)	410	640	870	960
Florida	2,000	3,500	4,200	4,400	4,900
Georgia	1,500	4,300	7,500	9,400	9,700
Hawaii	44	62	29	51	58
Idaho	670	860	820	820	810
Illinois	[2] 460	[2] 600	[2] 430	[2] 410	3,100
Indiana	(1)	(1)	(1)	350	1,100
Iowa	1,200	1,400	1,600	1,400	1,400
Kansas	1,100	1,100	990	850	940
Kentucky	6,100	4,700	4,500	4,000	3,900

See footnotes at end of table.

TABLE 17.—NUMBER OF CHILDREN REPORTED RECEIVING CHILD CARE UNDER THE WORK INCENTIVE PROGRAM—Continued

	Last day of—				
	December 1969	March 1970	June 1970	September 1970	December 1970
Louisiana	2,000	2,400	2,800	3,100	2,800
Maine	200	(1)	910	950	1,100
Maryland	[3] 460	[3] 1,000	[3] 920	3,400	3,700
Massachusetts	(1)	930	810	1,100	1,600
Michigan	7,900	7,900	8,200	9,300	9,100
Minnesota	(1)	(1)	2,100	2,400	2,700
Mississippi	(1)	(1)	(1)	(1)	1,100
Missouri	2,700	2,800	2,800	2,900	2,800
Montana	260	220	560	710	580
Nebraska	150	(1)	(1)	940	540
Nevada	(4)	(4)	27	80	160
New Hampshire	(4)	(4)	(4)	(4)	(5)
New Jersey	2,900	3,500	3,700	4,100	4,100
New Mexico	240	710	910	920	940
New York	(1)	7,800	15,400	17,900	17,800
North Carolina	340	910	1,100	1,400	1,300
North Dakota	320	370	330	360	320
Ohio	(1)	1,400	(1)	1,700	1,700

Oklahoma	200	560	740	900	880
Oregon	350	200	600	720	1,100
Pennsylvania	3,800	(1)	4,700	4,600	4,900
Rhode Island	(1)	830	850	(1)	720
South Carolina	240	230	220	130	240
South Dakota	300	380	310	360	480
Tennessee	2,600	3,300	4,100	3,500	2,800
Texas	(1)	(1)	(1)	(1)	(1)
Utah	1,400	1,700	2,200	2,400	2,500
Vermont	190	290	260	270	250
Virginia	550	2,400	3,000	3,100	3,400
Washington	(1)	(1)	(1)	(1)	(1)
West Virginia	(1)	650	820	790	560
Wisconsin	1,900	2,300	(1)	3,300	4,100
Wyoming	190	270	280	320	290
Guam		25		31	
Puerto Rico	6,000	7,300	8,500	8,600	8,300
Virgin Islands				72	
Total	53,200	74,300	96,300	119,000	127,000

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[1] Not reported.

[2] Excludes Cook County.

[3] Excludes Baltimore City.

[4] No program initiated.

[5] Program not fully implemented.

Source: Department of Health, Education, and Welfare, Social and Rehabilitation Service.

TABLE 18.—CHILD CARE ARRANGEMENTS REPORTED UNDER THE WORK INCENTIVE PROGRAM, BY TYPE OF ARRANGEMENT

	Last day of—				
	December 1969 [1]	March 1970 [2]	June 1970 [3]	September 1970 [4]	December 1970 [5]
Care provided in child's own home:					
Children under 6 years old	11,400	16,600	22,400	26,900	26,500
Children 6 to 14 years old	15,800	20,400	26,100	31,000	31,900
Subtotal	27,100	37,000	48,600	58,000	58,500
Care provided in relative's home:					
Children under 6 years old	2,800	3,800	5,200	6,500	7,000
Children 6 to 14 years old	2,700	3,800	4,900	5,700	5,700
Subtotal	5,500	7,600	10,100	12,200	12,700
Care provided in day care facility:					
Children under 6 years old	6,400	9,400	11,800	15,900	17,700
Children 6 to 14 years old	4,000	5,900	8,400	9,600	10,100

Subtotal	10,400	15,200	20,200	25,600	27,900
Other arrangements:					
Children under 6 years old	1,300	1,800	3,700	4,600	5,900
Children 6 to 14 years old	8,800	12,600	14,000	18,700	21,000
Subtotal	10,200	14,300	17,700	23,300	26,900
Total, all arrangements:					
Children under 6 years old	21,900	31,400	43,200	54,000	57,100
Children 6 to 14 years old	31,300	42,700	53,400	65,000	68,900
Total	53,200	74,100	96,600	119,000	126,000

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[1] 36 States reporting, representing 52 percent of the families receiving AFDC in December 1969.

[2] 40 States reporting, representing 68 percent of the families receiving AFDC in March 1970.

[3] 42 States reporting, representing 70 percent of the families receiving AFDC in June 1970.

[4] 48 States reporting, representing 93 percent of the families receiving AFDC in September 1970.

[5] 47 States reporting, representing 93 percent of the families receiving AFDC in December 1970.

Note: Totals may not add due to rounding.

Source: Department of Health, Education, and Welfare, Social and Rehabilitation Service.

TABLE 19.—CHILD CARE UNDER THE WORK INCENTIVE PROGRAM: CHILD CARE YEARS OF SERVICE PROVIDED DURING FISCAL YEAR 1970, BY IN-HOME, OUT-OF-HOME CARE

State	Total child care years	In-home care		Out-of-home care	
		Child care years	Percent of total	Child care years	Percent of total
Total	57,500	23,120	40.2	34,380	49.8
Alabama [1]	880	351	43.9	529	56.1
Alaska [1]	233	70	30.1	163	69.9
Arizona [1]	623	383	61.6	240	38.4
Arkansas	339	294	83.3	45	16.7
California [2]	10,772	3,079	28.6	7,693	71.4
Colorado	853	308	36.2	545	63.8
Connecticut	570	243	42.9	327	57.1
Delaware	146	7	4.6	139	95.4
District of Columbia	654	133	22.6	521	77.4
Florida	1,483	920	68.1	563	31.9
Georgia	712	500	70.3	212	29.7
Hawaii	24	1	3.8	23	96.2
Idaho	270	74	64.7	96	35.3
Illinois [1]	236	140	59.4	96	40.6
Indiana	5	4	81.7	1	18.3
Iowa	1,030	381	37.0	649	63.0
Kansas [1]	725	457	63.0	268	37.0
Kentucky [1]	2,652	1,060	40.0	1,592	60.0
Louisiana	1,521	571	37.6	950	62.4
Maine [1]	567	362	63.8	205	36.2
Maryland	2,989	407	13.8	2,582	86.2
Massachusetts	926	370	40.0	556	60.0
Michigan [1]	2,113	1,876	88.8	237	11.2
Minnesota	496	166	33.5	330	66.5
Mississippi	109	20	18.3	89	81.7
Missouri	2,262	890	39.4	1,372	60.6
Montana	341	132	39.0	209	61.0
Nebraska	178	41	23.3	137	76.7
Nevada					
New Hampshire					

TABLE 19.—CHILD CARE UNDER THE WORK INCENTIVE PROGRAM: CHILD CARE YEARS OF SERVICE PROVIDED DURING FISCAL YEAR 1970, BY IN-HOME, OUT-OF-HOME CARE—Continued

State	Total child care years	In-home care		Out-of-home care	
		Child care years	Percent of total	Child care years	Percent of total
New Jersey[1]	1,910	287	15.0	1,623	85.0
New Mexico[1]	271	106	39.9	165	60.1
New York	8,630	4,724	54.8	3,906	45.2
North Carolina	344	26	7.7	318	92.3
North Dakota	186	126	67.8	60	32.2
Ohio	235	136	58.0	99	42.0
Oklahoma	42	1	2.8	41	97.2
Oregon[1]	169	79	46.5	90	53.5
Pennsylvania[2]	3,758	940	25.0	2,818	75.0
Rhode Island[1]	368	69	18.8	299	81.2
South Carolina	4	4	100.0	0	0
South Dakota	396	138	34.9	258	65.1
Tennessee	1,675	1,305	88.0	370	12.0
Texas	67	61	91.3	6	8.7
Utah	594	196	33.1	398	66.9
Vermont	188	47	25.0	141	75.0
Virginia	1,873	606	32.4	1,267	67.6
Washington	1,305	392	30.0	913	70.0
West Virginia	261	164	63.1	97	36.9
Wisconsin	1,209	245	22.7	964	77.3
Wyoming	72	7	10.6	65	89.4
Guam[1]	3	0	0	3	100.0
Puerto Rico	213	107	50.0	106	50.0
Virgin Islands	18	14	80.2	4	19.8

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[1] Estimated from data for quarter ending June 30, 1970.

[2] Expenditures only reported, child years derived from estimated unit costs.

Source: Quarterly Expenditure Report for Child Care Services—Work Incentive Program (Form SRS–CB–9).

TABLE 20.—NUMBER OF MOTHERS OR OTHER CARETAKERS ENROLLED IN THE WIN PROGRAM AND NUMBER OF THEIR CHILDREN PROVIDED CHILD CARE, BY AGE GROUP AND BY STATE, AS OF THE LAST DAY OF THE QUARTER ENDED DEC. 31, 1970

State	Number of mothers or other caretakers	Number of children		
		Total	Under 6 years of age	6 through 14 years of age
Total	53,800	126,000	57,100	68,900
Alabama	960	2,200	1,100	1,000
Alaska	150	340	180	160
Arizona	(1)	(1)	(1)	(1)
Arkansas	640	1,900	930	1,000
California [2]	3,300	6,700	3,200	3,500
Colorado	1,400	3,200	1,500	1,700
Connecticut	910	2,100	900	1,200
Delaware	320	770	460	310
District of Columbia	420	960	530	430
Florida	2,200	4,900	2,600	2,300
Georgia	3,800	9,700	4,300	5,300
Guam	(1)	(1)	(1)	(1)
Hawaii	28	58	36	22
Idaho	400	810	430	380
Illinois	(3)	3,100	1,500	1,600
Indiana	420	1,100	520	570
Iowa	630	1,400	630	800
Kansas	400	940	440	500
Kentucky	1,700	3,900	1,700	2,300
Louisiana	930	2,800	1,200	1,600
Maine	510	1,100	560	510
Maryland	1,400	3,700	1,200	2,400
Massachusetts	1,000	1,600	990	650
Michigan	4,100	9,100	2,900	6,200
Minnesota	1,200	2,700	1,400	1,300
Mississippi	340	[4] 1,100	(1)	(1)
Missouri	1,100	2,800	1,300	1,500
Montana	280	580	280	300
Nebraska	240	540	270	270
Nevada	82	160	84	76
New Hampshire	(5)	(5)	(5)	(5)
New Jersey	1,600	4,100	1,700	2,400

TABLE 20.—NUMBER OF MOTHERS OR OTHER CARETAKERS ENROLLED IN THE WIN PROGRAM AND NUMBER OF THEIR CHILDREN PROVIDED CHILD CARE, BY AGE GROUP AND BY STATE, AS OF THE LAST DAY OF THE QUARTER ENDED DEC. 31, 1970—Continued

State	Number of mothers or other caretakers	Number of children		
		Total	Under 6 years of age	6 through 14 years of age
New Mexico	440	940	520	420
New York	10,000	17,800	9,100	8,600
North Carolina	580	1,300	540	790
North Dakota	160	320	190	130
Ohio	800	1,700	790	880
Oklahoma	340	880	410	460
Oregon	420	1,100	680	440
Pennsylvania	2,000	4,900	2,400	2,500
Puerto Rico	2,400	8,300	2,600	5,700
Rhode Island	310	720	410	310
South Carolina	87	240	100	140
South Dakota	220	480	260	220
Tennessee	1,000	2,800	1,200	1,600
Texas	(1)	(1)	(1)	(1)
Utah	1,100	2,500	1,100	1,400
Vermont	110	250	120	120
Virgin Islands	(1)	(1)	(1)	(1)
Virginia	1,400	3,400	1,500	1,900
Washington	(1)	(1)	(1)	(1)
West Virginia	230	560	320	230
Wisconsin	1,600	4,100	1,800	2,300
Wyoming	120	290	150	150

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[1] Data not reported.

[2] Excludes Orange County.

[3] Incomplete. Excludes Cook County. Other counties reported 360 mothers or other caretakers.

[4] Estimated.

[5] WIN program not fully implemented.

Source: Department of Health, Education, and Welfare, Social and Rehabilitation Service.

TABLE 21.—CHILD CARE ARRANGEMENTS, BY TYPE OF ARRANGEMENT, BY AGE GROUP AND BY STATE, OF MOTHERS OR OTHER CARETAKERS ENROLLED IN THE WORK INCENTIVE PROGRAM AS OF DEC. 31, 1970

State	Type of child care arrangement											
	Own home			Relative's home			Day care facility			Other		
	Total	Under 6 years of age	6 through 14 years of age	Total	Under 6 years of age	6 through 14 years of age	Total	Under 6 years of age	6 through 14 years of age	Total	Under 6 years of age	6 through 14 years of age
Total	58,500	26,500	31,900	12,700	7,000	5,700	27,900	17,700	10,100	26,900	5,900	21,000
Alabama	980	530	450	490	260	220	410	320	94	280	24	260
Alaska	81	55	26	19	9	10	140	100	31	110	10	96
Arizona	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)
Arkansas	1,300	640	640	54	21	33	400	260	130	200	6	190
California [2]	3,800	1,800	2,000	740	450	290	1,100	760	350	1,000	170	840
Colorado	930	520	410	520	340	180	900	540	370	860	130	730
Connecticut	750	360	390	130	77	50	790	450	340	420	16	410
Delaware	400	270	130	62	40	22	92	87	5	220	63	160
District of Columbia	380	160	220	19	8	11	400	340	53	160	22	140
Florida	1,300	670	660	780	400	380	1,700	1,400	360	1,000	120	900
Georgia	5,400	2,300	3,000	49	19	30	3,300	1,900	1,400	910	48	860
Guam	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)
Hawaii	20	13	7	7	7	0	12	12	0	19	4	15
Idaho	360	180	180	87	64	23	220	170	48	150	19	140
Illinois	1,300	610	690	330	210	120	920	610	320	560	70	490
Indiana	700	310	390	190	120	74	110	76	37	75	13	62
Iowa	470	210	260	180	120	60	500	300	200	280	5	280
Kansas	500	260	240	110	76	37	140	100	39	190	6	180
Kentucky	1,300	640	670	640	340	300	470	310	160	1,500	380	1,100
Louisiana	840	380	460	46	7	39	1,200	720	480	720	72	640
Maine	580	340	240	87	63	24	110	88	19	300	67	230
Maryland	2,400	790	1,600	480	230	260	180	120	58	660	100	550
Massachusetts	680	360	320	330	230	100	470	380	88	160	17	140
Michigan	6,200	2,100	4,100	740	400	340	540	320	220	1,700	110	1,600

Minnesota	1,200	680	500	77	49	28	760	570	190	680	64	620
Mississippi	(1)	(1)	(1)	(1)	(1)	(1)	[3] 52	(1)	(1)	(1)	(1)	(1)
Missouri	1,200	500	660	370	180	190	1,200	560	600	110	23	84
Montana	110	55	58	23	17	6	300	200	100	140	6	140
Nebraska	110	54	58	24	14	10	170	94	79	230	110	120
Nevada	74	39	35	0	0	0	19	12	7	67	33	34
New Hampshire	(4)	(4)	(4)	(4)	(4)	(4)	(4)	(4)	(4)	(4)	(4)	(4)
New Jersey	500	200	300	680	290	390	2,100	1,000	1,100	790	130	660
New Mexico	460	220	230	210	120	82	270	180	95	10	0	10
New York	7,300	3,600	3,700	2,300	1,300	920	1,400	980	450	6,800	3,200	3,600
North Carolina	210	65	150	270	110	170	280	210	67	560	150	410
North Dakota	160	100	58	16	8	8	70	57	13	74	24	50
Ohio	700	360	340	39	22	17	350	250	100	580	160	420
Oklahoma	280	110	170	200	90	120	360	190	170	35	20	15
Oregon	380	210	180	99	82	17	510	370	140	130	19	110
Pennsylvania	3,100	1,400	1,700	420	240	190	930	600	330	380	98	290
Puerto Rico	5,700	2,100	3,600	800	270	540	170	130	39	1,600	140	1,500
Rhode Island	210	100	110	180	80	99	320	220	94	4	1	3
South Carolina	130	53	74	39	23	16	12	11	1	66	16	50
South Dakota	150	77	73	84	54	30	220	130	90	28	0	28
Tennessee	2,300	950	1,300	35	18	17	250	200	51	220	5	210
Texas	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)
Utah	980	480	500	(1)	(1)	(1)	1,300	640	620	220	0	220
Vermont	100	53	47	16	13	3	48	38	10	82	17	65
Virgin Islands	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)
Virginia	810	450	360	290	180	110	1,600	840	700	740	42	700
Washington	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)
West Virginia	280	140	130	90	67	23	140	100	34	49	8	41
Wisconsin	1,300	790	500	320	210	120	820	610	210	1,700	190	1,500
Wyoming	42	21	21	40	30	10	110	91	[illegible]3	100	6	97

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[1] Data not reported.

[2] Excludes Orange County.

[3] Estimated.

[4] WIN program not fully implemented.

Source: Department of Health, Education, and Welfare, Social and Rehabilitation Service.

TABLE 22.—CHILDREN RECEIVING CARE IN OWN HOME, BY TYPE OF ARRANGEMENT, BY AGE GROUP, AND BY STATE, AS OF THE LAST DAY OF THE QUARTER ENDED DEC. 31, 1970

State	Total children receiving care in own home			Type of arrangement											
				Father			Other relative			Nonrelative			Homemaker services		
	Total	Under 6 years of age	6 through 14 years of age	Total	Under 6 years of age	6 through 14 years of age	Total	Under 6 years of age	6 through 14 years of age	Total	Under 6 years of age	6 through 14 years of age	Total	Under 6 years of age	6 through 14 years of age
Total	58,500	26,500	31,900	3,500	1,200	2,300	26,200	12,200	13,900	20,400	8,800	11,500	1,100	510	570
Alabama	980	530	450	18	2	16	810	460	350	150	59	90	1	1	0
Alaska	81	55	26	1	1	0	37	24	13	41	28	13	2	2	0
Arizona	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)
Arkansas	1,300	640	640	56	5	51	890	480	410	330	140	180	4	3	1
California [2]	3,800	1,800	2,000	140	45	94	1,100	540	520	2,600	1,200	1,300	54	18	36
Colorado	930	520	410	37	22	15	580	350	230	310	150	160	0	0	0
Connecticut	750	360	390	17	5	12	300	140	160	440	220	220	0	0	0
Delaware	400	270	130	78	44	34	120	89	26	210	140	72	0	0	0
District of Columbia	380	160	220	6	1	5	250	120	130	120	33	90	0	0	0
Florida	1,300	670	660	32	12	20	960	550	410	340	110	230	3	1	2
Georgia	5,400	2,300	3,000	98	18	80	3,400	1,600	1,700	1,900	690	1,200	1	1	0
Guam	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)
Hawaii	20	13	7	3	0	3	6	3	3	11	10	1	0	0	0
Idaho	360	180	180	14	4	10	42	19	23	300	160	140	0	0	0
Illinois	1,300	610	690	44	20	24	570	280	290	680	300	380	0	0	0
Indiana	700	310	390	66	19	47	390	190	200	250	100	140	0	0	0
Iowa	470	210	260	20	6	14	300	140	160	150	63	88	0	0	0
Kansas	500	260	240	31	9	22	200	120	90	260	130	130	3	1	2
Kentucky	1,300	640	670	31	6	25	980	510	470	300	120	170	0	0	0
Louisiana	840	380	460	1	1	0	580	260	320	260	110	140	0	0	0
Maine	580	340	240	24	10	14	400	260	140	150	65	87	2	2	0
Maryland	2,400	790	1,600	28	9	19	1,100	390	700	1,100	340	760	140	48	87

Massachusetts	680	360	320	21	5	16	290	150	140	370	210	170	0	0	0
Michigan	6,200	2,100	4,100	106	44	62	3,100	960	2,100	3,000	1,100	1,900	11	2	9
Minnesota	1,200	680	500	62	17	45	690	390	300	430	270	160	7	7	0
Mississippi	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)
Missouri	1,200	500	660	13	1	12	710	350	360	410	140	270	29	16	13
Montana	110	55	58	8	5	3	37	21	16	68	29	39	0	0	0
Nebraska	110	54	58	0	0	0	82	39	43	30	15	15	0	0	
Nevada	74	39	35	2	1	1	53	25	28	19	13	6	0	0	0
New Hampshire	(3)	(3)	(3)	(3)	(3)	(3)	(3)	(3)	(3)	(3)	(3)	(3)	(3)	(3)	(3)
New Jersey	500	200	300	15	2	13	220	95	120	270	110	160	0	0	0
New Mexico	460	220	230	(4)	(4)	(4)	[4]340	[4]170	[4]180	110	56	57	0	0	0
New York	7,300	3,600	3,700	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)
North Carolina	210	65	150	16	5	11	160	49	110	41	11	30	0	0	0
North Dakota	160	100	58	0	0	0	59	37	22	100	67	36	0	0	0
Ohio	700	360	340	9	5	4	270	150	120	420	200	210	0	0	0
Oklahoma	280	110	170	0	0	0	230	85	140	51	27	24	0	0	0
Oregon	380	210	180	43	20	23	61	48	13	260	130	130	20	7	13
Pennsylvania	3,100	1,400	1,700	150	46	100	1,500	750	770	1,500	620	850	1	1	0
Puerto Rico	5,700	2,100	3,600	2,200	770	1,400	2,700	960	1,800	320	130	200	460	210	250
Rhode Island	210	100	110	0	0	0	120	61	63	90	39	51	0	0	0
South Carolina	130	53	74	21	2	19	98	50	48	8	1	7	0	0	0
South Dakota	150	77	73	0	0	0	1	1	0	150	76	73	0	0	0
Tennessee	2,300	950	1,300	14	5	9	760	340	410	1,500	600	910	0	0	0
Texas	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)
Utah	980	480	500	0	0	0	520	290	240	460	190	270	0	0	0
Vermont	100	53	47	3	2	1	51	24	27	46	27	19	0	0	0
Virgin Islands	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)
Virginia	810	450	360	25	4	21	490	280	210	270	150	130	21	15	6
Washington	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)
West Virginia	280	140	130	17	7	10	160	86	76	100	52	48	0	0	0
Wisconsin	1,300	790	500	58	36	22	430	270	160	490	320	170	320	170	150
Wyoming	42	21	21	4	1	3	27	9	18	11	11	0	0	0	0

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[1] Data not reported.
[2] Excludes Orange County.
[3] WIN program not fully implemented.
[4] Fathers, if any, included in other relative count.

Source: Department of Health, Education, and Welfare, Social and Rehabilitation Service.

TABLE 23.—CHILDREN RECEIVING CARE IN DAY CARE FACILITIES, BY TYPE OF FACILITY, BY AGE GROUP, AND BY STATE, AS OF THE LAST DAY OF THE QUARTER ENDED DEC. 31, 1970

State	Total children receiving care in day care facilities			Type of facility								
				Family day care home			Group day care home			Day care center		
	Total	Under 6 years of age	6 through 14 years of age	Total	Under 6 years of age	6 through 14 years of age	Total	Under 6 years of age	6 through 14 years of age	Total	Under 6 years of age	6 through 14 years of age
Total	27,900	17,700	10,100	13,800	7,800	6,000	680	470	210	12,000	8,500	3,500
Alabama	410	320	94	220	150	62	0	0	0	200	160	32
Alaska	140	100	31	53	34	19	0	0	0	83	71	12
Arizona	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)
Arkansas	400	260	130	290	180	110	0	0	0	110	89	18
California [2]	1,100	760	350	470	310	160	15	14	1	620	430	190
Colorado	900	540	370	360	230	130	140	97	38	410	210	200
Connecticut	790	450	340	670	340	330	0	0	0	120	110	15
Delaware	92	87	5	29	27	2	2	2	0	61	58	3
District of Columbia	400	340	53	100	89	12	0	0	0	300	250	41
Florida	1,700	1,400	360	600	360	240	25	16	9	1,100	980	110
Georgia	3,300	1,900	1,400	270	120	150	7	7	0	3,100	1,800	1,300
Guam	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)
Hawaii	12	12	0	2	2	0	0	0	0	10	10	0
Idaho	220	170	48	150	110	41	4	4	0	61	54	7
Illinois	920	610	320	660	390	270	10	10	0	260	210	50
Indiana	110	76	37	110	70	37	0	0	0	6	6	0
Iowa	500	300	200	440	250	190	0	0	0	55	43	12
Kansas	140	100	39	100	70	34	0	0	0	35	30	5
Kentucky	470	310	160	120	52	73	3	3	0	340	250	90
Louisiana	1,200	720	480	850	400	450	0	0	0	350	320	26
Maine	110	88	19	63	49	14	5	5	0	39	34	5
Maryland	180	120	58	100	56	48	5	5	0	74	64	10
Massachusetts	470	380	88	62	38	24	9	8	1	400	340	63
Michigan	540	320	220	320	170	160	11	8	3	200	140	62
Minnesota	760	570	190	560	400	160	62	51	11	140	120	18

Mississippi	[3] 52	(1)	(1)	5	(1)	(1)	0	0	0	47	(1)	(1)
Missouri	1,200	560	600	900	440	470	120	57	64	140	70	68
Montana	300	200	100	230	140	85	0	0	0	69	52	17
Nebraska	170	94	79	140	60	75	1	1	0	37	33	4
Nevada	19	12	7	0	0	0	0	0	0	19	12	7
New Hampshire	(4)	(4)	(4)	(4)	(4)	(4)	(4)	(4)	(4)	(4)	(4)	(4)
New Jersey	2,100	1,000	1,100	1,500	560	930	0	0	0	610	480	140
New Mexico	270	180	95	200	120	71	3	3	0	72	48	24
New York	1,400	980	450	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)
North Carolina	280	210	67	22	10	12	1	1	0	250	200	55
North Dakota	70	57	13	60	47	13	1	1	0	9	9	0
Ohio	350	250	100	180	100	75	100	83	19	74	64	10
Oklahoma	360	190	170	170	100	68	0	0	0	190	87	100
Oregon	510	370	140	360	230	130	37	31	6	110	110	7
Pennsylvania	930	600	330	680	390	290	0	0	0	250	210	40
Puerto Rico	170	130	39	94	68	26	0	0	0	72	59	13
Rhode Island	320	220	94	220	130	90	0	0	0	98	94	4
South Carolina	12	11	1	0	0	0	0	0	0	12	11	1
South Dakota	220	130	90	190	110	75	6	5	1	28	14	14
Tennessee	250	200	51	83	64	19	0	0	0	170	140	32
Texas	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)
Utah	1,300	640	620	910	460	460	0	0	0	350	180	170
Vermont	48	38	10	31	22	9	0	0	0	17	16	1
Virgin Islands	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)
Virginia	1,600	840	700	540	290	250	71	32	39	940	530	410
Washington	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)
West Virginia	140	100	34	120	85	33	0	0	0	20	19	1
Wisconsin	820	610	210	500	370	130	33	21	12	290	220	66
Wyoming	110	91	18	73	61	12	5	2	3	31	28	3

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[1] Data not reported.

[2] Excludes Orange County.

[3] Estimated.

[4] WIN Program not fully implemented.

Source: Department of Health, Education, and Welfare, Social and Rehabilitation Service.

TABLE 24.—CHILDREN RECEIVING CARE OTHER THAN IN OWN HOME, RELATIVE'S HOME OR DAY CARE FACILITY BY TYPE OF ARRANGEMENT, BY AGE GROUP, AND BY STATE, AS OF THE LAST DAY OF THE QUARTER ENDED DEC. 31, 1970

State	Total children receiving "other" care			Type of arrangement						
				Caretaker working or in training only during child's school hours			Child looks after self (6 through 14 years of age)	Other		
	Total	Under 6 years of age	6 through 14 years of age	Total	Under 6 years of age	6 through 14 years of age		Total	Under 6 years of age	6 through 14 years of age
Total	26,900	5,900	21,000	10,200	550	9,700	4,200	5,700	2,200	3,500
Alabama	280	24	260	150	15	130	78	56	9	47
Alaska	110	10	96	82	6	76	12	12	4	8
Arizona	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)
Arkansas	200	6	190	160	5	160	25	11	1	10
California [2]	1,000	170	840	190	10	180	520	310	160	150
Colorado	860	130	730	420	14	400	160	280	110	170
Connecticut	420	16	410	220	3	220	180	29	13	16
Delaware	220	63	160	72	12	60	79	67	51	16
District of Columbia	160	22	140	0	0	0	94	66	22	44
Florida	1,000	120	900	210	3	210	440	370	120	250
Georgia	910	48	860	480	5	480	340	86	43	43
Guam	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)
Hawaii	19	4	15	8	1	7	3	8	3	5
Idaho	150	19	140	79	1	78	27	48	18	30
Illinois	560	70	490	390	13	380	74	97	57	40
Indiana	75	13	62	34	13	21	41	0	0	0
Iowa	280	5	280	220	5	220	54	8	0	8
Kansas	190	6	180	120	0	120	51	15	6	9
Kentucky	1,500	380	1,100	530	15	520	77	910	360	550
Louisiana	720	72	640	510	25	490	8	200	47	150
Maine	300	67	230	110	7	100	68	120	60	63
Maryland	660	100	550	180	8	170	72	410	96	310
Massachusetts	160	17	140	60	3	57	58	37	14	23

Michigan	1,700	110	1,600	1,400	60	1,300	170	140	48	92
Minnesota	680	64	620	530	34	500	86	61	30	31
Mississippi	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)
Missouri	110	23	84	20	0	20	22	65	23	42
Montana	140	6	140	100	0	100	25	16	6	10
Nebraska	230	110	120	5	0	5	5	220	110	110
Nevada	67	33	34	67	33	34	0	0	0	0
New Hampshire	(3)	(3)	(3)	(3)	(3)	(3)	(3)	(3)	(3)	(3)
New Jersey	790	130	660	430	37	390	110	260	97	160
New Mexico	10	0	10	10	0	10	0	0	0	0
New York	6,800	3,200	3,600	(1)	(1)	(1)	(1)	(1)	(1)	(1)
North Carolina	560	150	410	96	1	95	22	440	150	290
North Dakota	74	24	50	20	4	16	17	37	20	17
Ohio	580	160	420	170	12	150	76	340	150	200
Oklahoma	35	20	15	9	6	3	6	20	14	6
Oregon	130	19	110	2	0	2	80	44	19	25
Pennsylvania	380	98	290	200	31	170	55	130	67	64
Puerto Rico	1,600	140	1,500	1,200	29	1,200	140	290	110	180
Rhode Island	4	1	3	1	0	1	2	1	1	0
South Carolina	66	16	50	5	0	5	24	37	16	21
South Dakota	28	0	28	0	0	0	28	0	0	0
Tennessee	220	5	210	180	2	180	17	21	3	18
Texas	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)
Utah	220	0	220	190	0	190	35	0	0	0
Vermont	82	17	65	48	0	48	8	26	17	9
Virgin Islands	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)
Virginia	740	42	700	460	27	430	250	40	15	25
Washington	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)	(1)
West Virginia	49	8	41	20	1	19	5	24	7	17
Wisconsin	1,700	190	1,500	770	110	660	550	340	82	260
Wyoming	100	6	97	68	0	68	18	17	6	11

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[1] Data not reported.
[2] Excludes Orange County.
[3] WIN program not fully implemented.

Source: Department of Health, Education, and Welfare, Social and Rehabilitation Service.

TABLE 25.—NUMBER OF MOTHERS OR OTHER CARETAKERS WHO COULD NOT BE REFERRED TO THE STATE MANPOWER AGENCY FOR ENROLLMENT IN THE WIN PROGRAM SOLELY BECAUSE ADEQUATE CHILD CARE ARRANGEMENTS WERE NOT AVAILABLE AND NUMBER OF CHILDREN REQUIRING CHILD CARE, BY AGE GROUP, AND BY STATE, AS OF THE LAST DAY OF THE QUARTER ENDED DEC. 31, 1970

State	Number of mothers or other caretakers	Number of children		
		Total	Under 6 years of age	6 through 14 years of age
Total	3,600	8,500	4,200	4,300
Alabama	1	1	1	0
Alaska	1	8	4	4
Arizona	(1)	(1)	(1)	(1)
Arkansas	13	24	19	5
California	[2] 140	...	...	...
Colorado	55	130	87	41
Connecticut	(1)	(1)	(1)	(1)
Delaware	0	0	0	0
District of Columbia	0	0	0	0
Florida	4	8	8	0
Georgia	47	130	64	69
Guam	(1)	(1)	(1)	(1)
Hawaii	15	21	17	4
Idaho	0	0	0	0
Illinois	250	320	200	120
Indiana	3	5	2	3
Iowa	7	13	9	4
Kansas	27	85	52	33
Kentucky	(2)	(2)	(2)	(2)
Louisiana	40	87	56	31
Maine	0	0	0	0
Maryland	930	2,300	1,300	990
Massachusetts	50	110	69	42
Michigan	460	1,100	550	590
Minnesota	0	0	0	0
Mississippi	[3] 15	[3] 56	(1)	(1)
Missouri	66	130	69	60
Montana	0	0	0	0
Nebraska	0	0	0	0
Nevada	0	0	0	0

TABLE 25.—NUMBER OF MOTHERS OR OTHER CARETAKERS WHO COULD NOT BE REFERRED TO THE STATE MANPOWER AGENCY FOR ENROLLMENT IN THE WIN PROGRAM SOLELY BECAUSE ADEQUATE CHILD CARE ARRANGEMENTS WERE NOT AVAILABLE AND NUMBER OF CHILDREN REQUIRING CHILD CARE, BY AGE GROUP, AND BY STATE, AS OF THE LAST DAY OF THE QUARTER ENDED DEC. 31, 1970—Continued

State	Number of mothers or other caretakers	Number of children		
		Total	Under 6 years of age	6 through 14 years of age
New Hampshire	(4)	(4)	(4)	(4)
New Jersey	150	420	140	280
New Mexico	0	0	0	0
New York	(1)	(1)	(1)	(1)
North Carolina	16	24	20	4
North Dakota	0	0	0	0
Ohio	34	77	46	31
Oklahoma	4	14	4	10
Oregon	0	0	0	0
Pennsylvania	440	1,000	460	570
Puerto Rico	410	1,300	490	850
Rhode Island	15	31	26	5
South Carolina	54	200	82	120
South Dakota	0	0	0	0
Tennessee	23	62	34	28
Texas	(1)	(1)	(1)	(1)
Utah	4	8	2	6
Vermont	3	8	8	0
Virgin Islands	(1)	(1)	(1)	(1)
Virginia	180	400	180	220
Washington	(1)	(1)	(1)	(1)
West Virginia	14	28	20	8
Wisconsin	120	300	130	170
Wyoming	31	84	47	37

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[1] Data not reported.

[2] Incomplete.

[3] Estimated.

[4] WIN program not fully implemented.

Source: Department of Health, Education, and Welfare, Social and Rehabilitation Service.

TABLE 26.—THE WORK INCENTIVE PROGRAM: FUNDS APPROPRIATED AND USED FOR CHILD CARE SERVICES, AND NUMBER OF CHILDREN RECEIVING CARE

	Fiscal year 1969		Fiscal year 1970	
	Operating budget	Actual	Operating budget	Actual
Funds appropriated for WIN child care		$24,500,000		$52,000,000
Funds used for WIN child care		4,218,000		18,443,000
Average number of children receiving care:				
Preschool age	11,500	4,088	26,483	34,000
School age	33,900	10,512	68,099	23,500
Subtotal	45,400	14,600	94,582	57,500
Number of children receiving care at end of fiscal year	102,300	57,000	126,850	84,900

Source: President's budget for fiscal years 1971 (appendix pp. 442–443) and 1972 (appendix, pp. 462–463); Senate Appropriation Committee hearings on 1970 Labor-HEW appropriation bill (91st Cong., H.R. 13111), pt. 5, p. 3245.

TABLE 27.—CHILDREN IN FULL YEAR, FULL DAY HEADSTART PROGRAMS BY STATE, FISCAL YEAR 1970, AND FEDERAL COSTS

State	Children	Amount	Average per child cost
Alabama	3,003	$3,504,227	$1,167
Alaska	87	134,594	1,547
Arizona	3,711	4,035,604	1,088
Arkansas	2,745	3,032,926	1,105
California	1,883	2,334,969	1,040
Colorado	135	114,384	[1]847
Connecticut	436	492,047	1,129
Delaware	135	204,626	1,516
District of Columbia	540	953,031	1,765
Florida	8,417	9,016,267	1,071
Georgia	2,354	2,642,137	1,122
Hawaii			
Idaho	800	272,709	[2]341
Illinois	1,238	1,581,557	1,277
Indiana			
Iowa	301	397,632	1,321
Kansas	245	264,011	1,078
Kentucky	1,115	1,552,994	1,393
Louisiana	4,115	5,325,871	1,294
Maine	140	190,143	1,358
Maryland	1,426	2,115,840	1,484
Massachusetts	333	509,405	1,530
Michigan	980	1,282,987	1,309
Minnesota	237	358,426	1,512
Mississippi	14,917	19,134,825	1,283
Missouri	1,184	1,342,620	1,134
Montana	672	734,211	1,093
Nebraska	60	107,474	1,791
Nevada	120	239,643	1,997
New Hampshire	128	181,000	1,414
New Jersey	2,144	2,890,844	1,348
New Mexico	600	608,676	1,014
New York	3,853	6,281,733	1,630
North Carolina	3,735	4,107,921	1,100
North Dakota	388	517,824	1,335

TABLE 27.—CHILDREN IN FULL YEAR, FULL DAY HEADSTART PROGRAMS BY STATE, FISCAL YEAR 1970, AND FEDERAL COSTS—Continued

State	Children	Amount	Average per child cost
Ohio	3,209	3,209,315	1,000
Oklahoma	2,594	1,796,630	693
Oregon	655	760,907	1,162
Pennsylvania	1,856	2,880,670	1,552
Rhode Island	90	107,181	1,191
South Carolina	3,495	4,085,226	1,169
South Dakota	380	387,414	1,118
Tennessee	2,803	3,578,220	1,277
Texas	7,959	8,432,498	1,059
Utah	67	76,722	1,145
Vermont	270	291,068	1,078
Virginia	1,715	2,579,568	1,504
Washington	1,015	1,343,904	1,324
West Virginia	230	300,374	1,306
Wisconsin	700	729,277	1,042
Wyoming			
Total	89,215	107,022,132	1,200

[1] Low average due to one of two programs being on Indian reservation, with much lower average cost.

[2] Some programs operated only 5 months; also, non-Federal share of 38% instead of 20%.

Source: Department of Health, Education, and Welfare, Office of Child Development.

TABLE 28.—FEDERAL INCOME TAX DEDUCTION FOR CHILD CARE EXPENSES: NUMBER OF TAX RETURNS AND AMOUNT DEDUCTED, 1966

Adjusted gross income classes	Number of returns	Total amount deducted	Average Amount deducted
Under $5,000	99,451	$48,145,000	$484
$5,000 to $9,999	135,767	72,641,000	535
$10,000 to $14,999	14,453	7,452,000	516
$15,000 or more	4,752	2,693,000	567
Total	245,423	130,931,000	515

Source: U.S. Treasury Department, Internal Revenue Service, *Statistics of Income 1966: Individual Income Tax Returns*, table 2.8, p. 51.

TABLE 29.—TRAINING OF CHILD CARE PERSONNEL, FISCAL YEAR 1970

Program	Estimated number of persons trained
Department of Health, Education, and Welfare:	
Child welfare training	[1] 1,500
Education Professions Development Act:	
Teachers	2,000
Administrators, teacher trainers, and trainers of teacher trainers	1,500
Teacher aides	1,100
Subtotal	4,600
Follow Through (kindergarten teacher aides)	1,000
Headstart employee training:	
College level courses in child development	7,000
Short summer orientation and inservice training programs	60,000
Leadership development programs (6 to 8 weeks of intensive child development skill training)	2,000
Subtotal	69,000
Department of Labor manpower programs:	
Child care attendants	150
Kindergartners	15
Nursery school teachers	155
Nursemaids (in private homes)	1,110
Mothers' helpers (combination maid-attendants)	100
Subtotal	1,530

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[1] The extent to which these persons received training related to child care specifically is not known.

Source: Department of Health, Education, and Welfare—Social and Rehabilitation Service, Office of Education, and Office of Child Development; and Department of Labor.

TABLE 30.—CHILD CARE ARRANGEMENTS: NUMBER AND PERCENTAGE DISTRIBUTION OF CHILDREN OF FULL-TIME WORKING MOTHERS BY AMOUNT PAID, 1965

	Total number of children	No cost to mother	Less than $250 annually	$250 to $500 annually	More than $500 annually
Total number of children	8,315,000	6,140,000	461,000	865,000	849,000
Cared for in own home by:					
Member of family or relative	3,157,000	3,157,000			
Nonrelative who only looked after children	429,000	53,000	126,000	159,000	91,000
Nonrelative who usually did additional household chores	513,000	64,000	76,000	157,000	216,000
Subtotal	4,099 000	3,274,000	202,000	316,000	307,000
Cared for in someone else's home by:					
Relative	801,000	412,000	100,000	163,000	126,000
Nonrelative	836,900	99,000	133,000	318,000	286,000
Subtotal	1,637,000	511,000	233,000	481,000	412,000

Other arrangements:					
Care in group care center	239,000	22,000	27,000	66,000	124,000
Child looked after self	800,000	800,000			
Mother looked after child while working	575,000	575,000			
Mother worked only during child's school hours	917,000	917,000			
Other	50,000	41,000		2,000	7,000
Percentage distribution:					
Cared for in own home by:					
Nonrelative who only looked after children	100.0	12.3	29.3	37.0	21.4
Nonrelative who usually did additional household chores	100.0	12.6	14.8	30.7	42.0
Cared for in someone else's home by:					
Relative	100.0	51.4	12.5	20.4	15.7
Nonrelative	100.0	11.9	15.9	38.0	34.2
Care in group care center	100.0	9.1	11.3	27.7	51.9
Total, all children	100.0	73.9	5.5	10.4	10.2

Source: Seth Low and Pearl G. Spindler, *Child Care Arrangements of Working Mothers in the United States,* Children's Bureau Publication 461—1968, tables A-2, A-49, and A-50, pp. 71, 108.

TABLE 31.—ESTIMATED PERCENTAGE DISTRIBUTION OF FULL-DAY CHILD CARE ARRANGEMENTS BY ANNUAL COST TO MOTHER,[1] 1970

[In percent]

Type of arrangement	Total	Under $100 annually	$100 to $200 annually	$200 to $350 annually	$350 to $650 annually	More than $650 annually
Child in school	100.0	100.0				
Mother watches at work	100.0	100.0				
Child cares for self	100.0	100.0				
In-home care	100.0	82.1	2.2	5.6	9.1	1.0
Out-of-home care	100.0	14.7	8.2	22.6	35.2	19.3
Total	100.0	69.5	3.1	8.3	13.2	6.0

[1] Includes mothers with at least 1 child under 10 years old and with family income of less than $8,000.

Source: Based on Westinghouse Learning Corp., *Day Care Survey 1970: Summary Report and Basic Analysis*, table 4.36, p. 190.

TABLE 32.—PROFESSIONAL EMPLOYEES IN THE DAY CARE PROGRAMS OF STATE AND LOCAL PUBLIC WELFARE AGENCIES, BY TYPE OF POSITION, 1967–1969

	June 1967	June 1968	June 1969
Total professional employees	677	745	938
Full-time professional employees:			
Directors	13	22	24
Casework supervisors	44	53	89
Caseworkers	327	360	460
Social work specialists	96	120	110
Specialists other than social work	135	120	140
Child care assistants	31	41	56
Total full-time employees	646	716	879
Part-time professional employees:			
Caseworkers	11	15	44
Social work specialists	5	6	7
Specialists other than social work	7	6	7
Child care assistants	7	2	1
Total part-time employees	31	29	59

Source: Department of Health, Education, and Welfare, Social and Rehabilitation Service, *Child Welfare Statistics 1967* (table 25, p. 32); *1968* (NCSS Report CW-1, table 26, p. 31); and *1969* (NCSS Report CW-1, table 27, p. 33).

TABLE 33.—LICENSING OF CHILD CARE CENTERS OFFERING GROUP CARE UNDER STATE LICENSING REGULATIONS

State	State Department responsible for licensing	Child care centers licensed			Exemptions from State licensing requirement	Political subdivisions with separate child care center licensing requirements
		If number of children exceeds—	If age of children is—			
			Between—	And—		
Alabama	Pensions and Security	[2]4	3[2]	[2]15	State-owned and controlled institutions.	
Alaska	Health and Welfare	6	(1)	(1)	Primarily educational facilities	Greater Anchorage Borough.
Arizona	Health	4	(1)	16	Educational institutions	
Arkansas	Public Welfare	5	(1)	6		Little Rock, North Little Rock.
California	Social Welfare	(1)	2[3]	16	Educational institutions	
Colorado[4]	Social Services	4	2½	16	do	
Connecticut	Health	4	4 weeks.	15	Educational institutions, recreational facilities.	East Hartford.
Delaware	Health and Social Services.	11	(1)	18	State-owned and controlled institutions.	
District of Columbia	Public Health	(1)	(1)	15		
Florida	Health and Rehabilitative Services.	5	2[5]	(1)	Facilities in all counties except Dade, Duval, Orange. Preschool educational programs for less than 4 hrs. per day; educational programs for school-age children.	Most other large counties.
Georgia	Family and Children Services.	6	(1)	18		
Hawaii	Social Services and Housing.	5	2	(1)	Primarily educational, social, or athletic facilities.	
Idaho	Public Assistance	4	2½	18		
Illinois	Children and Family Services.	8	(1)	(1)	Schools, babysitting services, recreation-type programs.	Chicago.

Indiana	Public Welfare	(1)	3	(1)	State-operated institutions	
Iowa	Social Services	5	2	(1)	Institutions under management of Dept. of Socl. Services.	
Kansas	Health	4	3	(1)	State-operated institutions	
Kentucky	Child Welfare	6	(1)	(1)	Facility operated by religious organization while religious services are being conducted.	
Louisiana	Public Welfare	4	(1)	17	Facilities providing 4 hrs. or less of child care per day.	
Maine	Health and Welfare	12	2½	16	Primarily educational facilities	Portland.
Maryland	Health and Mental Hygiene.	3	1	7	Facilities operated by Boards of Education.	Baltimore City and County, Montgomery, and Prince Georges.
Massachusetts	Public Health	2	3 [6]	(1)	Educational institutions	
Michigan	Social Services	(1)	2½	6	Government-operated facilities	
Minnesota	Public Welfare	5	3	12		
Mississippi [7]	do	6	2	(1)	Facility	
Missouri	Public Health and Welfare.	6	3	17	Facility operated by State or religious order; primarily educational, recreational, or health facility.	
Montana	Public Welfare	6	2	12	Primarily educational facilities	
Nebraska	do	7	3	16		Lincoln, Omaha.
Nevada	Health, Welfare, and Rehabilitation.	4	(1)	16	Public institutions	Clark, Washoe, Las Vegas City.
New Hampshire	Health and Welfare	6	3	16	Educational institutions, summer camps, hospitals.	
New Jersey	Education	5	2	5	Certain Government-operated institutions.	
New Mexico	Health and Social Services.	4	(1)	(1)	Primarily educational institutions; care during religious services.	
New York	Social Services	6	8 wks	15	Day camp; kindergarten; nursery school; after school program (primarily religious).	New York City.

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TABLE 33.—LICENSING OF CHILD CARE CENTERS OFFERING GROUP CARE UNDER STATE LICENSING REGULATIONS—Continued

State	State Department responsible for licensing	Child care centers licensed			Exemptions from State licensing requirement	Political subdivisions with separate child care center licensing requirements
		If number of children exceeds—	If age of children is—			
			Between—	And—		
North Carolina [7]	do	15	(1)	(1)		
North Dakota	Public Welfare	(1)	3 [8]	(1)	State-operated institutions	
Ohio	do	4	(1)	(1)	Child care in places of worship during religious services.	
Oklahoma	do	5	(1)	18	Primarily educational, recreational, or medical facilities.	Oklahoma City.
Oregon	do	2	(1)	15	Primarily educational, athletic or social facilities.	Portland City, Multnomah Co.
Pennsylvania	do	6	3	16	Child care in place of worship during religious services.	
Rhode Island	Social and Rehabilitative Services.	2	3	14	Facilities providing 4 hrs. or less of child care per day.	
South Carolina	Public Welfare	(1)	(1)	(1)	Primarily educational facilities; facility operated by religious denomination; State institutions.	
South Dakota	do	5	(1)	(1)	Primarily educational or recreational facility.	
Tennessee	do	7	2	17	Primarily educational facility; facility operated by religious organization.	
Texas	do	6	(1)	14	State institutions	Austin.

Utah	do	2	2	14	Facilities providing 4 hrs. or less of child care per day; educational facilities.	
Vermont [9]	Economic Opportunity	[10] 11	(1)	(1)	Facilities providing care to children of not more than 2 families (not including operator's children); hospitals; primarily educational or recreational facility; care in place of worship during religious service.	
Virginia	Welfare and Institutions	9	(1)	18	Educational institutions; summer camps.	Hampton, Newport News, Martinsville, Alexandria Fairfax County, and Arlington County.
Washington	Public Assistance	(1)	2½	(1)	Facilities providing 4 hrs. or less of child care per day; seasonal camps.	
West Virginia	Welfare	5	2	(1)	County shelters for delinquent children.	
Wisconsin	Health and Social Services.	3	(1)	7	Educational Institutions, YMCA	
Wyoming	Public Welfare	5	3	17	Governmental Institutions, summer camps operated by nonprofit organizations.	Cheyenne, Casper.

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[1] Not specified.

[2] Separate facilities for up to 5 children 6 wks. to 3 yrs. will be required in the future; meanwhile, children between 2½ and 3 yrs. may be admitted to centers licensed before July 1969.

[3] Special regulations apply to group care of children under age 2.

[4] Data applies to "children's centers"; Colorado also licenses other types of group care facilities.

[5] Infants under 2 yrs. admitted only if provision for needs of children is met consistently by one person.

[6] Departmental approval required for children under 3.

[7] Licensing not required; standards relate to voluntary certification.

[8] Special approval required for licensure for care of children under 3.

[9] Under proposed regulations.

[10] Facility for 6 to 12 children considered "group day care home" with separate licensing standards.

Source: Based on material submitted to the Office of Economic Opportunity.

TABLE 34.—CHILD CARE CENTERS: MINIMUM STAFFING REQUIREMENTS, BY AGE OF CHILDREN, UNDER STATE LICENSING REGULATIONS

	Maximum number of children per staff member * if age of children is—						Minimum number of adults on premises
	under 2	2 to 3	3 to 4	4 to 5	5 to 6	School age	
Alabama	[1] 5	[1] 5	10	20	20	25	2
Alaska	5	5	10	10	10	10	2
Arizona	10	10	15	20	25	25	[4] 2
Arkansas	4	6	10	10	10	(10)	[5] 2
California	(2)	12	12	12	12	12	1
Colorado	(2)	[3] 8	10	12	15	15	2
Connecticut	4	4	7	9	9	12	2
Delaware	[6] 8	[7] 15	15	20	20	25	1
District of Columbia	[8] 10	10	10	10	10	(9)	[9] 1
Florida	5	10	10	10	10	15	1
Georgia	[11] 10	10	15	18	20	25	2
Hawaii	(2)	10	15	20	25	25	1
Idaho	(2)	[3] 10	10	10	10	10	[12] 1
Illinois	6	8	10	[13] 10	25	25	1
Indiana	(2)	(14)	10	12	15	20	2
Iowa	(2)	6	12	15	18	25	2
Kansas	(2)	(14)	12	12	16	16	[15] 1
Kentucky	6	8	10	12	15	15	[4] 2
Louisiana	[8] 14	14	14	14	14	14	[4] 2

Maine	(2)	[3] 8	10	15	18	20	2
Maryland	(10)	(10)	(10)	(10)	(10)	(10)	1
Massachusetts	(2)	(14)	10	10	15	15	2
Michigan	(2)	[3] 10	10	12	20	(10)	[4] 2
Minnesota	10	10	10	10	10	10	1
Mississippi [16]	(2)	8	10	15	20	25	2
Missouri	(2)	(14)	10	10	15	15	2
Montana	(2)	15	15	20	25	25	2
Nebraska	(2)	(14)	7	7	7	12	1
Nevada	2	10	10	10	10	15	1
New Hampshire	(2)	(14)	(10)	(10)	(10)	(10)	2
New Jersey	(2)	(10)	(10)	(10)	(10)	(10)	1
New Mexico	10	15	15	15	15	(10)	1
New York	[17] 5	5	5	7	7	10	1
North Carolina [16]	[6] 8	12	15	20	25	30	[18] 1
North Dakota	3	5	10	10	12	12	2
Ohio	[19] 10	10	15	15	20	20	2
Oklahoma	[20] 6	8	12	15	15	20	[15] 1
Oregon	10	10	10	10	10	10	1
Pennsylvania	(2)	(14)	8	10	10	13	2
Rhode Island	(2)	(14)	5	8	13	(10)	2
South Carolina	6	8	10	14	15	15	2
South Dakota	8	8	8	12	18	25	[15] 1
Tennessee	(2)	10	10	15	25	30	[15] 1
Texas	4	8	12	15	18	25	1
Utah	(2)	10	15	15	20	25	2

Footnotes on p. 72.

TABLE 34.—CHILD CARE CENTERS: MINIMUM STAFFING REQUIREMENTS, BY AGE OF CHILDREN, UNDER STATE LICENSING REGULATIONS—Continued

	Maximum number of children per staff member * if age of children is—						Minimum number of adults on premises
	under 2	2 to 3	3 to 4	4 to 5	5 to 6	School age	
Vermont [24]	2	6–8	6–8	6–8	6–8	([10])	2
Virginia	3	10	10	10	10	10	2
Washington	([2])	[3] 10	10	10	10	10	[4] 2
West Virginia	([2])	8	10	15	18	20	[12] 1
Wisconsin	[21] 4	[22] 8	10	12	16	16	[23] 2
Wyoming	([2])	([14])	10	15	20	([10])	1

* Includes only persons providing child care; when there is a mixture of ages, the ratio for the youngest child is generally applicable.

[1] Children under age 3 must be in separate facilities.

[2] Children under 2 generally may not be accepted.

[3] Ages 2½ to 3. Children 2 to 2½ generally may not be accepted.

[4] When the number of children exceeds 10.

[5] When the number of children exceeds 10, during peak hours of the day.

[6] 5, if children are under 1.

[7] 8, if children are under 2½.

[8] 6, if children are under 1½.

[9] 2, when there are at least 10 children of school age.

[10] Not specified under licensing requirements.

[11] 7, if children are under 1½.

[12] 2 if possible.

[13] If full day; 20, if half day.

[14] Children under 3 generally may not be accepted.

[15] 2d adult must be available in case of emergency.

[16] Licensing not required; standards relate to voluntary certification by State Department of Public Welfare. For Mississippi, ratios apply to number of children enrolled.

[17] 4, if children are under 1½.

[18] 2, if more than 6 children under age 3.

[19] 8, if children are under 1½.

[20] 4, if infants in cribs.

[21] 3, if children are under 1.

[22] 6, if children are under 2½.

[23] When the number of children exceeds 9.

[24] Under proposed regulations.

Source: Based on material submitted to Office of Economic Opportunity.

TABLE 35.—QUALIFICATIONS OF CHILD CARE CENTER STAFF REQUIRED UNDER STATE LICENSING REGULATIONS

State	Qualifications of director		Qualifications of other staff		Medical examination required—	
	Minimum age	Education and experience	Minimum age	Education and experience	Initially	Annually
Alabama		High school or equivalent; 3 mos. experience.[1]		High school or equivalent [1]	×	×
Alaska	21	High school or group child care experience.			×	×
Arizona	21		[2] 18		×	([4])
Arkansas	21	High school or equivalent [3]	21	High school or equivalent [3]	×	
California [5]	21	12 college credits in early childhood education plus courses in administration plus either experience or college degree.	18	Equipped for work required	×	([4])
Colorado		College graduate, early childhood education major; also applies to head teacher.	[6] 21	High school	×	×
Connecticut		High school or equivalent plus 1 yr. experience.		High school or equivalent, pursuing further preparation.[7]	×	×
Delaware		High school plus 3 yrs. experience; formal training in child development.[8]	[9] 18	High school or equivalent plus 1 yr. experience; completion of 2 courses in child development.[9]	×	×
District of Columbia		Equipped for work required		Equipped for work required	×	×
Florida		do		do	([10])	([10])
Georgia	[11] 18	Completed child care training or experience.			×	×
Hawaii		4 yrs. college plus 2 yrs. experience, or 2 yrs. college plus 4 yrs. experience.		College degree or college plus other training in child development.[12]	×	×
Idaho		Equipped for work required		Equipped for work required	([13])	
Illinois	21	2 yrs. college, or high school or equivalent plus 3 yrs. experience.	[14] 18	High school or equivalent or training in child care.[14]	×	([15])
Indiana		2 yrs. college with child development courses in equivalent experience.[16]		High school	×	×
Iowa	16	Equipped for work required [17]	16	Equipped for work required [17]	×	([15])
Kansas	([11])	College graduate, child development major, 1 yr. experience.		do	×	
Kentucky		Appropriate college training suggested			×	([4])
Louisiana		High school education preferred			×	×

Footnotes on p. 75.

TABLE 35.—QUALIFICATIONS OF CHILD CARE CENTER STAFF REQUIRED UNDER STATE LICENSING REGULATIONS—Continued

State	Qualifications of director		Qualifications of other staff		Medical examination required—	
	Minimum age	Education and experience	Minimum age	Education and experience	Initially	Annually
Maine	21	High school or equivalent; 6 mos. experience; completion of course on child development.[18]		High school or equivalent [19]	×	(4)
Maryland						
Massachusetts		High school or equivalent plus 3 yrs. experience plus 4 courses in early childhood education or 1 yr. of college plus 2 yrs. experience plus 1 course in early childhood education.		High school or equivalent plus 1 course in early childhood education.[19]	×	(4)
Michigan		2 yrs. college		Some preparation and experience	×	×
Minnesota		Equipped for work required		Equipped for work required	×	×
Mississippi [20]	21	2 yrs. college with child development training or 2 yrs. experience.	[21] 21	2 yrs. college with child development training or 2 yrs. experience.[21]	×	×
Missouri		2 yrs. college or experience	18	Equipped for work required	×	×
Montana		Equipped for work required		do	×	
Nebraska	21	4 yrs. college or experience recommended.	[2] 21	College training in nursery school education recommended.	×	×
Nevada	21	2 yrs. training or experience	18	Equipped for work required	×	(10 15)
New Hampshire [5]	21	High school	[24] 16	High school [19]	×	×
New Jersey		Teacher's certificate or 2 yrs. experience; also applies to head teacher.		2 yrs. college plus 1 yr. experience plus 15 college credits in child development or 2 yrs. experience plus 15 college credits plus college enrollment.[22]	×	×
New Mexico		Equipped for work required		Equipped for work required	×	×
New York	21	do	17	do	×	×
North Carolina [20]	21	do		do	(10)	(10)
North Dakota		High school plus some child care training or experience.			×	×
Ohio		2 yrs. college or 2 yrs. experience		High school or completion of child care training program.	×	×
Oklahoma		High school or equivalent experience		High school or equivalent experience	(10)	(10)
Oregon					(10)	(10)
Pennsylvania	21	2 yrs. college level with 1[illegible] credits in child development.		High school, 1 yr. experience, child care training.[23]	×	×

Rhode Island		College graduate, preferably early childhood education major.		High school plus 2 yrs. college or experience.[24]	×	×
South Carolina	18	Equipped for work required	13	Equipped for work required	×	×
South Dakota	21	24 college credits in early childhood education or eligible to be member Natl. Assoc. of Social Workers.	21	12 college credits in early childhood education.[25]	×	×
Tennessee		College graduate, early childhood education major, preferred.		High school or equivalent experience	×	×
Texas	21	High school or equivalent	[24] 21	Equipped for work required	×	×
Utah		Equipped for work required		do	×	×
Vermont	18	1 yr. experience	[24] 18	do	×	×
Virginia		15 college credits		High school	×	×
Washington	21	College graduate with child development major or 3 yrs. experience.	[24] 18		([26])	([26])
West Virginia	21	High school; further child care training desirable.	18		×	×
Wisconsin	21	2 yrs. college with 1 child development course or high school with 2 child development courses.[27]	18	Completion of child care course or training.	×	×
Wyoming	21	2 yrs. college with child development courses or 6 yrs. experience.	16		×	×

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[1] College training required for director if there are more than 30 children in the center; qualifications shown apply to centers not caring for infants under 3.

[2] Persons age 16 permitted if under adult supervision.

[3] Staff must attend at least 1 of the following during the year: staff training workshops, meetings of local preschool workers, professional meetings, or 1st aid training.

[4] Tuberculosis examination required annually (every 3 yrs. in Massachusetts).

[5] Separate qualifications apply to centers serving infants in California; in New Hampshire, qualifications apply to group day care facilities.

[6] Applies to child group leaders; helpers must be at least 16 and work under the direct suprevision of a head teacher or director.

[7] Applies to program assistants; not required of program aides.

[8] Or a 4-year college degree in early childhood education (or its equivalent) and 1 year of experience.

[9] Applies to teachers only; aides must be at least 14 years old and reliable.

[10] Chest X-ray required prior to employment and annually thereafter; in North Carolina, initial and annual serology test also required.

[11] At least 1 person 21 or over must be present at the center.

[12] Applies to teachers only; high school or experience with children required for assistant teachers.

[13] May be required.

[14] Applies to assistants; student helpers must be at least 14 and under the supervision of a director or child care worker.

[15] At least every 2 years in Illinois and Nevada; at least every 3 years in Iowa.

[16] Also applies to head teacher; for director, 4 years of college with child development courses (or equivalent work experience) required if there are more than 30 children in the center.

[17] If the nursery is licensed as a "school" there must be at least 1 teacher who is a high school graduate and has college credits.

[18] 2 years of college required for new facilities or for other facilities in which there are more than 20 children in the center.

[19] Not required of aides.

[20] Licensing not required; standards relate to voluntary certification.

[21] Teachers only; high school education required of assistant teachers.

[22] Group teachers only; assistant must be high school graduate or parent.

[23] Group supervisors only; for assistant group supervisors, high school or 2 years experience.

[24] Not applicable to aides working under supervision.

[25] Only high school required of assistants to teachers.

[26] Chest X-ray required prior to employment and every 2 years thereafter.

[27] If center has less than 9 children, high school or equivalent plus 1 course in child development.

Source: Based on material submitted to Office of Economic Opportunity.

TABLE 36.—FACILITY REQUIREMENTS FOR CHILD CARE CENTERS OFFERING FULL-DAY GROUP CARE UNDER STATE LICENSING REGULATIONS [1]

State	Minimum required square feet of space per child		Provisions concerning indoor space				Fencing of outdoor space	Must hot food be served?
	Indoor	Outdoor	Only floors generally permitted	Isolation room required	Isolation area required	Individual cot, etc. for naps required		
Alabama[2]	35	60	Ground; 1st	×		×	Required if hazardous	Yes.
Alaska	30		Ground or above	×		×	Required	No.
Arizona	35	75	Below 2d	×		×	do	Yes.[3]
Arkansas	35	75	Ground; 1st	×		×	do	No.
California[2]	35	75			×	×	do	No.
Colorado	30	[4] 75		×		×	do	No.
Connecticut	30	75			×	×		No.
Delaware	35		([5])		×	×		No.
District of Columbia	35	60	No room more than ⅓ below ground level.		×	×		No.
Florida	25	40		×			Required	No.
Georgia	35	[6] 100	No room more than 3 ft. below ground level.		×	×	do	No.
Hawaii	35	75			×	×	([7])	No.
Idaho	35	[8] 75	Ground	×		×	Required if hazardous	Yes.
Illinois	[9] 35	75			×	×	Required	Yes.
Indiana	35	50	Grade level	([10])		× [11]	([7])	No.
Iowa				×		× [11]	Required if hazardous	No.
Kansas	35	100	Ground; 1st	×		×	do	Yes.
Kentucky	35		Not above 1st		×	×	do	No.
Louisiana	35	[6] 75			×	×	Required	Yes.

Maine	20	75		×		×	do	No.
Maryland	30				×	×	do	No.
Massachusetts	35	[6] 75		×		×	Required if hazardous	No.
Michigan	35	[12] 75	Ground, 1st	×		×		No.
Minnesota	35	75	do		×	×	(7)	No.
Mississippi [13]	30	65			×	×	(7)	Yes.
Missouri	35	75			×	×	Required	No.
Montana	35	100	Ground; 1st	×		×	Required if hazardous	Yes.
Nebraska	35		Not basement		×	×	Required	No.
Nevada	35	75	Ground [14]		×	×	do	No.
New Hampshire	35	75	Below 3d	×		×	Required if hazardous	No.
New Jersey	30	100	1st	×		×	Required	Yes.
New Mexico	35	[6] 60	(15)	×		×	do	No.
New York	35		Floors with readily accessible exit.		×	×		Yes.
North Carolina [13]	30	75				×	(7)	No.
North Dakota	35	75		×		×	Required if hazardous	No.
Ohio	35	[6] 60	1st floor for infants		×	×	(7)	No.
Oklahoma	35	75	Ground; 1st		×	×	Required	No.
Oregon	35		Above street level		×	×	(7)	No.
Pennsylvania	35	[16] 65	Ground or above		×	×	(7)	No.
Rhode Island	35	75	Ground		×		Required	No.
South Carolina	35	75	Not above 2d; not more than 3 ft. below ground level.	×		×	Required	No.
South Dakota	35	50	Room with outside windows	×		×	Required if on street	No.
Tennessee	30	[6] 50			×	×	Required if hazardous	No.
Texas	35	[6] 80	1st for children under 3		×	×	Required	No.
Utah	35	40	1st for children under 4		×	×	do	No.
Vermont [17]	25				×		Required if hazardous	No.

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TABLE 36.—FACILITY REQUIREMENTS FOR CHILD CARE CENTERS OFFERING FULL-DAY GROUP CARE UNDER STATE LICENSING REGULATIONS[1]—Continued

State	Minimum required square feet of space per child		Provisions concerning indoor space				Fencing of outdoor space	Must hot food be served?
	Indoor	Outdoor	Only floors generally permitted	Isolation room required	Isolation area required	Individual cot, etc. for naps required		
Virginia	20			X		X		No.
Washington	35	75	Not above 1st story above grade.	X		X		No.
West Virginia	35	100	Playrooms exposed to sunlight		X	X	Required	Yes.
Wisconsin	35	[6] 75	Floors having 2 exists to ground level.		X	X	([7])	No.
Wyoming	35	200				X		No.

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[1] In addition to State and local fire, health, zoning, safety, and sanitation requirements.

[2] There are separate requirements for centers providing care for infants.

[3] If provided by facility.

[4] Or 200 sq. ft. per child per group occupying the space at one time.

[5] Only areas having 2 exits to the ground floor shall be used; basement rooms may be used only for play periods and not for resting or sleeping; infants shall be housed on the ground floor.

[6] Minimum area per child per group occupying the space at one time.

[7] Outdoor space must be fenced or protected.

[8] 100 sq. ft. for each child 6 or older.

[9] 25 sq. ft. for each infant under 2.

[10] Required if there are more than 100 children in the center.

[11] For each preschool age child.

[12] Each center must have a minimum of 1,000 sq. ft. of play area.

[13] Licensing not required; standards relate to voluntary certification by State Department of Public Welfare (Mississippi) or State Department of Social Services (North Carolina).

[14] Basement may be used as play area but not for sleeping or eating.

[15] No rooms may be below ground level unless 1 of 2 exits required opens directly to the outside.

[16] Each center must have a minimum of 650 sq. ft. of play area.

[17] Under proposed regulations.

Source: Based on material submitted to Office of Economic Opportunity.

TABLE 37.—STATE LICENSING REGULATIONS CONCERNING FAMILY DAY CARE HOMES

State	Maximum number of children [1]	Maximum number of children under age 2	Staff qualifications		Facility requirements [3]	
			Medical examination required	Other [3]	Indoor requirements	Outdoor requirements
Alabama	[4,6] 6	[4] 2	Twice a year		No room below street level; individual cots; isolation area.	
Alaska	6		Annually	21 yrs. old	Individual cots	
Arizona [4]	4		Initially	21 to 65 yrs. old	Individual cots recommended.	
Arkansas	6	2	Annually	21 to 65 yrs. old; persons 16 to 21 may assist.	35 sq. ft. per child; isolation area; baby bed for each child under 2.	Fenced if traffic hazardous.
California	6	2	TB exam		Individual cots	
Colorado	6	2	Annually		35 sq. ft. per child	75 sq. ft. per child;
Connecticut	4	[7] 2	Initially	Must have car or be able to arrange for transportation in emergency.	Provision for rest period	
Delaware	[8] 6	[9] 3	do			
District of Columbia			Annually		Individual cots; isolation area.	
Florida	5	2	TB and blood tests annually.	21 yrs. old (18 if approved).	25 sq. ft. per child; separate infant nap space.	
Georgia	6	[10] 3	Annually		35 sq. ft. per child; provisionf or naps.	40 sq. ft. per child. 100 sq. ft. per child in group using area; fenced or protected.
Hawaii	5	2	Initially, with TB exam annually.		35 sq. ft. per child; individual cots; isolation area.	Protected well drained,

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TABLE 37.—STATE LICENSING REGULATIONS CONCERNING FAMILY DAY CARE HOMES—Continued

State	Maximum number of children [1]	Maximum number of children under age 2	Staff qualifications		Facility requirements [3]	
			Medical examination required	Other [2]	Indoor requirements	Outdoor requirements
Idaho	6	2	May be required.		35 sq. ft. per child; individual cots; isolation area.	75 sq. ft. per child under 6; 100 sq. ft. per child 6 or over.
Illinois	[7] 8	[7] 2	Initially		Individual cots; isolation area.	Protected play area.
Indiana	[8] 6		do		Isolation area; 35 sq. ft. per child when more than 6 children.	50 sq. ft. per child, enclosed yard when more than 6 children.
Iowa	5		Initially and every 3 yrs.	Not more than 50 yrs. older than the children.		
Kansas	[11] 6	2	do	21 to 60 yrs. old	Napping facilities on or above ground level, isolation area.	Fenced if hazardous.
Kentucky	6		Initially; annual TB test.		35 sq. ft. per child; individual cots; isolation area.	Fenced if necessary.
Louisiana [12]	6		Initially		Provision for naps; isolation area; hot meal.	
Maine	[13] 6	2	Annually	18 yrs. old; 2 adults available in case of emergency.	Individual cots; isolation area;hot meal.	
Maryland	4		Initially	21 to 70 yrs. old	Isolation area	
Massachusetts			Annually	21 yrs. old	Reasonably accessible to parent; individual cots; isolation area.	
Michigan	4	[14] 2		Not more than 65 yrs. old.	40 sq. ft. per child in sleeping room; isolation area.	Do.
Minnesota	5	[14] 2	Initially		Isolation area; hot meal.	Do.
Mississippi [15]	[6] 6	2	do		Provision for naps; isolation area.	Do.

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Missouri [12]	6	2	Annually		Individual cots; isolation area.	Do.
Montana	6	2			Provision for naps; isolation room.	Do.
Nebraska	7	2	Annually	21 to 65 yrs. old	35 sq. ft. per child; hot meal; isolation area.	Fenced if children are 6 or younger.
Nevada [16]			Annually			
New Hampshire	[17] 6	3	Initially	21 to 65 yrs. old	Individual cots, isolation area; play equipment to meet developmental needs of the child.	Play equipment to meet the developmental needs of the child.
New Jersey	5	[14] 2	do		Individual cots	
New Mexico	[18] 6	2			Children under 2 in separate rooms.	Fenced if necessary.
New York	6	2	Initially		Hot meal; rooms above ground level.	
North Carolina [13]	5		Annually	21 yrs. old	Individual cots	75 sq. ft. per child; fenced if necessary.
North Dakota	[6] 5	[6] 2	Initially		35 sq. ft. per child; isolation area.	75 sq. ft. per child.
Ohio	[6] 6	2	do	21 yrs. old; training or experience in caring for children.	35 sq. ft. per child; provision for naps; isolation area.	
Oklahoma	5		do		Individual cots	
Oregon [16]						
Pennsylvania	[6] 6	2	Annually	21 yrs. old	Rooms at ground level or above; individual cots; isolation area.	Fenced or otherwise protected if there are toddlers.
Rhode Island	[19] 4	2		21 to 60 yrs. old	Individual cribs for babies	
South Carolina	7		Annually		35 sq. ft. per child; individual cots; isolation area; rooms must have windows above street level.	75 sq. ft. per child; fenced if hazardous.
South Dakota	6	2	Initially	21 yrs. old	Reasonably near child's neighborhood; individual cots; isolation area; hot meal.	

TABLE 37.—STATE LICENSING REGULATIONS CONCERNING FAMILY DAY CARE HOMES—Continued

State	Maximum number of children [1]	Maximum number of children under age 2	Staff qualifications		Facility requirements [3]	
			Medical examination required	Other [2]	Indoor requirements	Outdoor requirements
Tennessee [12]	[20] 7	[20] 3	Annually	18 yrs. old		Protected against traffic hazards.
Texas	[18] 6	2	do	21 to 65 yrs. old	500 cubic ft. per child; provision for naps.	Fenced.
Utah	6		do		Individual cots; isolation area.	
Vermont [24]	6	2	do	18 yrs. old	Provision for rest period; isolation area.	Protected from hazards.
Virginia	9	(21)	Initially		Isolation area; provision for naps.	
Washington	[22] 6	2	May be required.		Isolation area	Fenced if necessary.
West Virginia	[5] 6	2	Annually	21 to 60 yrs. old	Individual cot; hot meal	
Wisconsin						
Wyoming	5		Annually		Provision for rest period	

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[1] Including the operator's own children.

[2] Excludes generally stated requirements concerning maturity, suitability, good character, etc.

[3] In addition to State and local fire, health, zoning, safety, and sanitation requirements; this table omits requirements that "safe" or "adequate" indoor and outdoor space be available.

[4] Standards apply when child care is purchased by State.

[5] If there are 2 children under 2, the total number of children may not exceed 5.

[6] For homes caring for children 3 to 16 years old; 5, for homes caring for children through age 6 (in North Dakota, there may be 5 children of any age if there is a helper).

[7] In Connecticut, there may be 4 infants if a full time adult assistant is present; in Illinois, a helper must be present if there are (a) more than 4 children under 6; or (6) more than 2 children under 2 or handicapped.

[8] Larger day care homes may be licensed; additional staff is required.

[9] No more than 3 infants shall be cared for by 1 person.

[10] A helper must be present if there are 3 children under 2½ in addition to older children.

[11] If there are children under 2, the maximum is 4 children, not more than 2 of whom are under 2.

[12] Licensing is not required if there are 4 or fewer children.

[13] If all the children are 6 or younger and there are children under 2½, the maximum is 5 children, not more than 2 of whom are under 2½.

[14] No more than 2 children under 1 year old.

[15] Licensing not mandatory; standards relate to voluntary certification.

[16] Facilities for fewer than 5 children are not licensed; those for 5 or more children are licensed as day care centers.

[17] The number of infants may not exceed 3; when there are 2 or 3 infants, the total number of children may not exceed 4.

[18] If there are 2 children under 2, not more than 1 additional child under 6 may be admitted.

[19] Up to 8 children if there are 2 adults.

[20] No more than 3 children under 18 months; if all children are under 3, the number of children may not exceed 5.

[21] There must be 1 adult for every 3 children under 2 and for every 6 children 2 or older.

[22] If all children are 2 and older, the maximum number of children may be increased to 10.

[23] Facilities for fewer than 4 children are not licensed; those for 4 or more children are licensed as day care centers.

[24] Under proposed regulations.

Source: Based on material submitted to Office of Economic Opportunity.

APPENDIXES

APPENDIX A

Excerpts From "Child Care Arrangements of Working Mothers in the United States"*

* * * * * * *

The Children and Arrangements for Their Care: An Overview

In February 1965 there were 12.3 million children under 14 years of age whose mothers had worked, either full or part time, for at least 6 months during the preceding year. This number represented one-fifth (22 percent) of all the nation's children in this age range. On the average, working mothers had 2.0 children under 14 (1.9 for full-time, and 2.2 for part-time, working mothers). In addition, about one-third of the mothers had at least one child 14–17 years of age.

Mothers or other respondents were asked: "While (Mother) was working, who usually looked after (Child)?" The interviewers translated the answer into one of the codes in a precoded classification of arrangements, a classification that worked well, as indicated by the fact that the residual category ("other arrangements") was used only for one-half of 1 percent of the children. For children who were attending school part of the time while their mothers were working, the question referred to the time the children were not in school. A separate code was used for children whose mothers worked only during school hours and for whom no other care was provided.

The question on child care was asked separately for each child under 14 years of age, since mothers may make different arrangements for each child depending on age, school attendance, or other factors. As mothers may make more than one kind of arrangement for a given child during the course of a year, the question referred to the most recent month the mother worked. For a woman who was employed during the survey week, this was the month before the interview. For other women, the question referred to the last month they had worked. Since 83 percent of the mothers were employed at the time of the survey, the arrangement reported for the great majority of children was the one that was in effect in January 1965. If a mother made more than one arrangement during the month, the one in effect longest was selected.

A brief overview of the arrangements reported will serve as an introduction to a more extended analysis.

Nearly half of the 12.3 million children (5.6 million or 46 percent) were cared for in their own homes while their mothers were working. This most frequent type of child care consisted of care by the father—15 percent; care by a relative other than the father—21 percent; and care by a nonrelative—9 percent. Such care for a child does not mean that he must have remained within his own home all the time, but that the person responsible for his welfare could usually be found there while taking care of him.

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*By Seth Low and Pearl G. Spindler, Children's Bureau Publication 461–1968.

Children cared for in their own homes by a relative other than the father (2.6 million children in all) included among their number 570,000 who were cared for by a relative under 16 years of age, presumably an older brother or sister, and 440,000 who were cared for by a relative 65 years of age or older, presumably grandparents. Many grandparents doubtless were included also in the age group under 65.

Children cared for in their own homes by nonrelatives numbered 1.2 million. Half of these nonrelatives served only to look after children; the other half were housekeepers or maids who usually had household duties in addition to looking after children.

Child care was provided in someone else's home (not the child's) for 1.9 million children (16 percent of the total). About half of these children were cared for by a relative and half by a nonrelative. Care in someone else's home by a nonrelative is termed "family day care" in this report.

Two types of arrangements, affecting substantial numbers of children, involved the mother herself. There were 1.6 million children (13 percent) who were looked after by the mother while she was working. Mothers who look after their own children may work in a family store, business, or farm, or, much less frequently, may take children to their place of work and look after them there. Another 1.8 million children (15 percent) had mothers who worked only during their children's school hours and required no special arrangements.

Rarest of all arrangements was group care of children in a day care center, nursery school, or like facility. Only 265,000 children (2 percent) were cared for in this way. To this number should be added approximately 81,000 children cared for in someone else's home by a nonrelative who cared for six or more children other than her own. These children, although cared for in a family home, are commonly considered to be in group care because of the large number of children supervised. Their inclusion brings the total in group care up to 346,000 (3 percent).

Nearly 1 million children (994,000 or 8 percent) looked after themselves while their mothers worked. Most of them attended school part of the time the mother was away but were expected to care for themselves the rest of the time. These children in self-care, often called "latch-key children" because they carry on their person a key to the home, were left on their own without supervision.

Child care arrangements usually covered all of the time the mother was away at work. There were 1.3 million children (11 percent), however, for whom the arrangement did not extend this long and for whom a supplementary arrangement covering the rest of the time was necessary. Supplementary arrangements were generally in the child's own home (four-fifths of such arrangements), the father typically being in charge. The children most likely to have a supplementary arrangement were those who were cared for in their own homes by a nonrelative who had no other domestic duties, and those who were in group care centers. More than a fourth of the children for whom such arrangements were made required supplementary care.

The predominant role of the family in providing child care while the mother worked is readily apparent. If all arrangements are combined in which children are cared for by themselves or by their immediate or extended family (mother, father, or other relative) 80 percent of the children are covered. The link to the child's home is present also for the 9 percent of the children who, although cared for by a nonrelative, were cared for in their own homes.

Care of children outside the home or family accordingly plays a relatively limited role at the present time. Only 10 percent of the children of working mothers (1.2 million children) were cared for in this way. This 10 percent consisted of 7 percent in family day care and 3 percent in group care.

Child care arrangements varied widely among different groups of mothers and children. Among the influential factors were the extent of the mother's employment, the child's age, color, the mother's marital status, her education and occupation, and the family income. The full meaning of the survey data can only be obtained by considering these variations.

APPENDIX B

Excerpts From Day Care Survey 1970: Summary Report and Basic Analysis, Presented to the Office of Economic Opportunity by the Westinghouse Learning Corporation, April 1971

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II. Major Findings

A. Family Day Care Homes

Because day care usually brings to mind child care provided in some sort of day care center, the category of family day care homes is often overlooked completely.[16] Certainly much less attention has been paid to the kind of care provided in such homes or to the appropriateness of perhaps expanding this type of day care service. Yet the majority (55%) of all children in day care full-day are cared for in family day care homes.

More than half of the day care homes have white operators and are located in single family units situated in a residential, single family neighborhood. Three-fourths of the homes care for only one or two children on a full-day basis. More than one-fifth of the children in such homes are under 2 years of age.

Probably the single most striking statistic on day care homes is that less than 2 percent of the estimated 450,000 homes are licensed as compared with almost 90 percent of the centers. Some states do not require licensing if there are fewer than a certain number of children (usually three) being cared for. Nevertheless, this very small percentage of licensed homes seems to bear out the findings of the community studies that complicated, contradictory and often overly detailed and rigid requirements discourage licensing. Licensing agencies are often understaffed and have little opportunity to recruit day care mothers or to seek out homes which should be licensed.

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[16] For this report family day care homes are those which care for not more than seven children, with at least one child being cared for seven or more hours per day, at least two days per week, for pay. This classification excludes foster homes providing 24-hour care.

Family day care homes, then, are generally unregulated and unsupervised by any governmental or social agency. Hundreds of thousands of children, including those whose fees are paid by government funds, are cared for in these homes, about which very little is known. This survey is the first attempt to assess the extent and describe the characteristics of day care homes.

B. Day Care Centers

About 575,000 children receive full-day care in day care centers. These centers are so heterogeneous that it is difficult, if not impossible, to generalize about their characteristics. Nevertheless, some of the more striking statistics give a profile of day care centers nationwide. An estimated 17,500 centers provide full-day care. Sixty percent of these centers are proprietary, and proprietary centers care for about half the children enrolled in centers. Among the various nonprofit organizations, churches provide the greatest number of facilities, about 18 percent of all centers, and United Fund agencies operate the oldest day care centers. Public schools operate day care centers for some 108,000 children, but they offer little in the way of "extended day" programs for the school-age children of working mothers. More than four times as many preschool as school-age children are in public school day care programs. Only 21,000 school-age children in about 350 schools are cared for after school or before and after school.

1. *Facilities*

Day care centers, for the most part, occupy houses, specially-constructed buildings, and churches; and they are located in residential neighborhoods. They are not, as yet, located in or near the workplace, except for hospital-sponsored facilities for nurses' children. Although no such centers were identified by the national survey, several were found in the six communities visited; and the Women's Bureau has identified about 150 hospital-affiliated day care centers.[17] It is impossible to tell from this survey whether workplace facilities would have appeal for mothers.

The amount of equipment for child use varies greatly from center to center, but most centers have some or all of the following kinds of equipment and playthings: indoor muscle development equipment such as blocks and trucks; quiet play epuipment such as puzzles, art supplies, housekeeping toys, musical toys and instruments; educational materials such as workbooks; science equipment; audiovisual equipment; cots and cribs; and outdoor play apparatus. The estimated replacement value of this child-related equipment, on the average, is $55 per child. It should be understand that this figure deos not include administrative and kitchen equipment and furniture, or maintenance equipment. At several large, well-equipped centers visited during the community studies task, the average *total* equipment cost per child was estimated at approximately $100.

2. *Day Care Programs*

Very little attempt was made in this survey to characterize the programs or activities carried out at the centers. It was felt that this kind of description could only be made on the basis of expert observation over time, an approach that was not part of the survey design. The interviewers were encouraged to comment on their impressions and observations of the centers they visited, however, and from their notes and the on-site observations of the community studies teams, some idea of fairly general practices can be developed. At last some attempt is made in many centers to teach children words, stories, songs, and skills such as managing their own clothes. Apparently most operators of day dare centers believe that they should provide preschool education, although what this means and how it is carried out varies widely. In contrast, neither they nor the parents mentioned health services very frequently as a responsibility of day care centers.

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[17] Women's Bureau, Department of Labor, *Child Care Services Provided by Hospitals,* 1970.

3. *Characteristics of Day Care Staff*

The people working in day care centers nationwide are, for the most part, neither well-educated nor well-paid. Most directors and teachers do not have college degrees and very few have had special training for day care work, e.g., courses in early childhood development. The median reported salary for both directors and teachers is less than $360 a month. There is not a great deal of experience among those presently employed in day care centers. Nearly a fourth of all staff members had less than a year's experience in group child care, and 51 percent of all staff have been working in day care less than three years. Women comprise almost the entire staff; only about 6 percent (including administrators and maintenance personnel) are men. Contrary to expectation, few day care personnel are volunteers. Less than 4 percent of the staff are volunteers and only 1 percent of them work full-time. Little use is made of teachers' aides. Perhaps this fact is related to the low status of day care teachers, most of whom have the education and salary level more often associated with paraprofessional than professional positions.

Estimates of average staff to child ratios nationwide are likely to be meaningless, partly because of the wide differences in individual center ratios and staffing patterns, and partly because of the great number of part-time personnel. Their schedules and number of working hours vary enormously, making any computation of their total contribution a complex process.

4. *Clientele of Day Care Centers*

Day care centers serve children from infancy through school-age. The largest age group in centers is the 4-year-old group. An estimated 24,000 children under 2 years old are enrolled in centers. While over half of all centers offer care of school-age children, only about 87,000 school children receive before and/or after school care in centers.

Centers serve a proportionately greater number of black than white children since 36 percent of the children in centers are black. As might be expected, black children tend to be in the larger centers, which are more frequently nonproprietary and located in large metropolitan areas.

A large number of centers (38%) do not permit sick children to attend, which means that working mothers whose children are enrolled in these centers must stay home from work or make other arrangements when their children have colds or other minor illnesses. Working mothers need day care centers which are equipped to care for slightly sick children.

5. *A Typology for Day Care Centers*

In the course of the community studies, it was observed that day care centers seemed to fall into three categories or types of facilities. Through procedure described in section 2.1, it was found that the centers in the national sample could also be categorized by these types. This typology should not be confused with levels of quality. It is based on aims of the program and descriptive elements without regard to whether these aims are being met, how well the elements are functioning, or what effect they have on the children and families being served. Good and bad Type A centers and good and bad Type C centers can be found.

Type A centers aim to provide what is generally known as "custodial" care, that kind of care which is necessary for maintaining the physical well-being and safety of the child but without any systematic attempt to educate him. Good custodial centers approximate good home care. They have small child to staff ratios, variety and sufficient quantity of equipment and playthings, adequate space, safe environments, warm and child-loving adults, daily routines, nutritious food, and happy children.

Type B centers may be identified as "educational" day care. They provide an adequate child care program but few if any related services. These centers usually have a curriculum and, for part of the day at least, they approximate a kindergarten; they have a regulated, school-like atmosphere. Good educational centers have trained personnel on the staff and intellectually stimulating environments, i.e., games and toys designed for specific learning objectives, musical instruments, art equipment, animals, plants, good books; and they keep progress records on the children.

Type C centers might be called "developmental" or "comprehensive" because they aim to provide everything necessary for the full development of the child's physical, mental, and social capabilities. Good developmental centers conform to the Federal Interagency Day Care Requirements. (Although a large proportion of Type C centers are funded by the federal government, some centers of this type are proprietary.) A good developmental facility offers complete health care, social services to the family, parent education and involvement, in-service staff training, attention to the emotional and creative needs of children, and concern for community relations, in addition to adequate care and supervision.

No attempt was made in this study to evaluate day care centers, either in terms of their own objectives and clientele or against some external criteria. It is apparent from the overall statistics, from a review of operator questionnaires, and from the on-site observations in six communities, however, that many centers of each type fall short of the descriptions of good facilities. On the other hand, there are some examples of good centers in each category. Thus, it would be a mistake to equate Type C with good day care and Type A with bad or inadequate care.

6. *Unfilled Day Care Slots*

An estimated 63,000 unfilled day care slots evenly divided between proprietary and nonproprietary facilities were found in this survey. Many unfilled slots also were discovered during the community studies field visits. Normal turnover may account for some of the unfilled slots and the fees of proprietary centers may explain the underenrollment in centers of this type, but nonproprietary centers usually charge less and frequently base their fees, if any, on the parents' ability to pay. The community profiles showed that location may be a critical factor in underutilization of facilities. Centers that were not fully enrolled in these communities tended to be inaccessible to families that need them, and transportation to a day care center can be an insurmountable problem for a working mother.

7. *Characteristics of User Families*

Day care centers currently do tend to serve lower-income families as earlier studies have shown. The parents of children in the day care centers surveyed were estimated by center operators to have a median income of $7,500 which is $1,100 less than the median family income for all U.S. families in 1968. A disproportionate number of single parent families use center care: nearly one-third of the families using centers are families without the father present. Most user-mothers, regardless of the presence of a man in the household, are working.

Parents of children enrolled in day care centers expect the center to provide good food, education, training, and good care. Parents of children in centers categorized as B and C types cited education as an expected provision of day care centers more frequently than parents of children in Type A centers. Apparently either those parents who most value preschool education for their children choose centers which tend to provide this element, or they have come to value education because of their exposure to it in the centers where their children are enrolled. Given the limited choice available to parents because of the scarcity and cost of day care centers, it seems likely that the second condition is operating more frequently.

Most of the working mothers whose children are in centers seem to be satisfied with group care for their children: a majority of them want no change in their day care and of those who want better day care, most would prefer an improved center rather than another type of arrangement.

8. *Costs of Day Care*

The costs of day care centers are borne principally by parents and the federal government. Other sources of revenue include state and local governments and community organizations. Exactly how much is paid from which source is impossible to determine from the available data. According to the day care operators, over half the receipts come from parent fees, but an estimated 17 percent of these fees are actually paid in full or in part by welfare grants or manpower training allowances. Some federal money channeled through state and local agencies may have been identified by respondents as local funds. As might be expected 99 percent of the income of proprietary centers is reported as parent fees, while multiple sources of support for nonproprietary centers is the rule rather than the exception.

Extreme caution must be exercised in interpreting cost data reported by day care centers. It is certain that complete costs have not been reported in many cases. No attempt was made to impute the value of donated goods and services or rent-free space. Moreover, the concept of a full-day equivalent child, used to compute costs per child, has some limitations because one actual full-day child requires more food, equipment, furniture and adult attention than two children, each of whom spends (typically) only two and a half to three hours at the center. Nevertheless, if these limitations are understood, some useful estimates of cost, particularly comparative costs of different types of centers, can be made. For example, the median cost per month for a full-day equivalent child is $27 in Type A centers, $45 in Type B centers, and $114 in Type C centers. Since cost frequently does not include proprietor's income and since Type A centers are predominately proprietary, the median cost per child of $27 for this type of center is understated.

C. Mothers: Day Care Arrangements and Participation in Work Force

In this part of the survey, mothers in families with incomes of less than $8,000 and a child age 9 or under were interviewed. The purpose of these interviews was to gather information that might provide answers to the following questions:

How many of these mothers are employed?

What arrangements do the working mothers make for the care of their children?

How much do these arrangements cost?

What are these mothers' preferences in child care?

To what extent does difficulty with child care affect the labor force participation of these mothers?

1. *Child Care Arrangements of Working Mothers*

Working mothers in the target population have 3.7 million children under 14 years of age, 1.6 million of whom are under six years old. Most of these children are cared for in their own homes and three-fourths of the mothers using in-home care said they were well satisfied with this arrangement. Of the 2 to 5 year-olds in out-of-home care, 29 percent are in day care centers, while 39 percent are in day care homes.

Although a smaller percentage of children are cared for in centers than in family day care homes, more of the mothers whose children are in centers are well satisfied with this arrangement. The least satisfactory types of arrangements, according to these working mothers, are those involving a sibling or non-relative caring for the child in the home or care in a family day care home.

The average cost for out-of-home care for seven or more hours a day is about $9.80 per week. Most in-home care is provided by a relative at no charge.

Working mothers whose children are cared for in a variety of arrangements most frequently cite good care, good food, and safety as the elements of child care they value or the provisions they expected. Only about a third of these mothers think that a day care facility should provide preschool education. (In contrast, mothers who are using centers are more likely to expect education as a provision of day care.)

2. *Child Care Preferences of Working and Nonworking Mothers*

As might be expected, care in the child's home is the type of arrangement that has greatest acceptability among mothers in the target population. It is used most frequently by working mothers and cited most frequently as their preference, if they went to work, by nonworking mothers. However, there are indications in this survey of significant interest in and desire for day care centers. Of working mothers who want better day care, about one-third would prefer care in a day care center. Nearly a third (29%) of the nonworking mothers said they would prefer care in a center, if they went to work.

Preference for day care centers over other types of arrangement is associated with race. Over half of the black mothers would like center care as compared with less than a fourth of the white mothers. As the center survey showed, black mothers have had somewhat more exposure to group day care than white mothers have. In addition, more blacks than whites have had Head Start experience. Whatever the reason, centers clearly have greater acceptance among black than white mothers.

Nonworking mothers have the same expectations of day care as working mothers have. Good food, good care, and safety have priority, with educational, social, and health provisions mentioned much less frequently.

The greatest number of working mothers in the target population (36%) stated that they would be willing to pay between $7 and $13 a week for their preference in child care for preschool children. The next largest group (16%) said they could not afford to pay anything. Over half these mothers would not be willing to pay for care of school-age children, but 28 percent said they would pay $3 to $7 a week for before- and after-school care.

3. *Relationship Between Day Care and Mothers' Employment Status*

According to the nonworking mothers who had children in day care centers,[18] availability of child care is only one of a number of complex and interrelated factors involved in a woman's choice regarding employment. Inability to find a job, cited about 13 percent of the time, may be related to the low educational level of user—mothers. No interest in working was claimed without explanation in a number of cases. Nearly half of these nonworking user-mothers gave such a variety of answers that they could not be categorized. The jobs that are open to women, the salaries offered, and the mother's education and training (or lack of it) all have bearing on whether or not a mother seeks a job outside the home. Her decision is also influenced by the kind of childcare arrangements she feels are necessary, the kind of child care available to her, the effect of her absence on the household, the cost of going to work, and so on.

In the area sample only 16 percent of the nonworking mothers stated absolutely that they would not work, but more than 34 percent said they preferred to be home with their children and another 18 percent said they could not make (or afford) satisfactory child care arrangements. A number of other reasons for not working were given and those who had worked since having children gave a variety of reasons, not always child-related, for having stopped working.

Other studies have shown the correlation of education and employment for women.[19] The percent of mothers in the target population (less than $8,000 family income and child age 9 or under) who had completed twelve or more years of school is significantly less than the corresponding figure for the adult population nationwide. In addition, a smaller percentage of mothers in the target population is working than in the population of all mothers: 25 percent of the households surveyed have working mothers while 39 percent of all mothers with children under 17 and 30 percent of those with children under 6 are working.[20] Within the population surveyed, this correlation between education and employment is further demonstrated. The largest group of working mothers (15% of all mothers in the target population) has ten to twelve years of education. Very few of the mothers in the target population have more than a high school education, but a third of those who do are employed. A comparison between the educational levels of working and nonworking mothers in the survey also reinforces the significance of education: 80 percent of the working mothers have completed tenth grade or more, while only 69 percent of the nonworking mothers have had that much education.

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[18] These mothers were surveyed in the "User Sample" and are not to be confused with parents surveyed in the "Area Sample."

[19] Including: Ruderman, Florence A. *Child Care and Working Mothers*, 1968; Seth Low and Pearl G. Spindler, *Child Care Arrangements of Working Mothers*. 1968.

[20] Bureau of Labor Statistics reported in Bureau of National Affairs, Inc., *Manpower Information Service*, Vol. 2, No. 12, Feb. 24, 1970.

Education apparently is a strong factor in determining whether or not a woman enters the labor force, but other factors also impinge. The presence of children is obviously a deterrent to women's work force participation, nevertheless a large number of working mothers (358,000) admitted that their child care arrangements were unsatisfactory. Yet they work. No one knows hows how many children of working mothers are left without adequate care and supervision. As this survey shows, many mothers take jobs regardless of the availability of acceptable child care arrangements.

The only conclusion possible is that there is no simple relationship between the availability of child care facilities and the employment of mothers. It seems unlikely that, if day care centers and homes were accessible to all mothers, the nonworking mothers would use them in order to take any job available to them. A woman might understandably prefer to stay at home with her children if she would have to pay for child care or accept an unsatisfactory arrangement in order to work at a menial, low-paid job. Of course, an unskilled, poorly educated woman might not have the choice of any job. If both acceptable jobs and suitable day care facilities were available, however, it would appear that many of the nonworking mothers would join the labor force.

In summary, then, most working mothers in the target population express satisfaction with their present child care arrangements. Of those who would prefer a change, about one-third would choose center care. The most frequent choice of nonworking mothers would be in-home care, followed by care in a center. Both working and nonworking mothers expect a day care program to provide good food, good care, and safety, while those mothers whose children are in centers that provide some kind of educational component also rank education high on the list of expected elements. To what extent the availability of various kinds of day care influences mothers' decisions to work has not been determined; however, the lack of adequate child care, as evaluated by the mother, may not be sufficient to prevent her from working as evidenced by the working mothers who are very dissatisfied with their present arrangements.

III. The Need for Day Care

Day care for young children in the United States today is an institution lagging far behind the social change that has brought about the need for it. It is an unorganized, largely unregulated, and unlicensed service, provided in ways that range from excellent to shockingly poor, and yet it is indispensable to a growing number of people in present-day America: the force of working women of child-bearing age. Working mothers represent all socioeconomic levels, and the family with a working mother is becoming the norm rather than the exception. In the absence of organized day care, ad hoc arrangements, which are largely impossible to assess in any accurate way, abound.

The following statistics illustrate the fact that very few of the nation's children of working mothers are cared for in any organized way.

Children under age 6 with working mothers	*3, 800, 000
Children in day care centers and family day care homes full-day	1, 300, 000
In centers full-day	575, 000
In family day care homes full-day	712, 000
Children aged 6 to 14 with working mothers	*8, 500, 000
Children in before and/or after school care	233, 000
In public schools	21, 000
In day care centers	87, 000
In family day care homes	125, 000

***Bureau of the Census Current Population Survey, 1965. (This is the most recent statistic available.)**

Even these facilities are, for the most part, unregulated. Ninety-eight percent of the homes are unlicensed, and although 90 percent of the centers are licensed, it would be a mistake to assume that possession of a license assures compliance to state and local regulations.

In the six communities studied it was found that licensing agencies have neither the authority, the staff, nor the funds to enforce the standards.

The need for day care among low- and moderate-income families was of particular concern in the survey reported here. The following statistics highlight the findings of this survey.

—358,000 low- and moderate-income working mothers are very dissatisfied with their present arrangements for child care.

—An estimated three-quarters of a million low- and moderate-income mothers are not working because they cannot find satisfactory child care.

—The cost per child for full-day care in a day care center is approximately $56 per month.[21] Low- and moderate-income working mothers who pay for child care presently pay an average of about $35 per child per month.

—373,000 low- and moderate-income working mothers with preschool children say that they would prefer care in a day care center for their children.

Based on these statistics, various estimates of the extent of this need can be made. While it is not the intent of this report to make recommendations to the government, some of the findings raise questions relating to the definition of "need for day care" that should be considered. Day care facilities are needed, not only for the children of poor mothers who want to work, but also for the children of already working mothers who are unable to arrange for adequate child care. There are more than one and a half million preschool children in families with incomes of less than $8,000 whose mothers are working. Information about the arrangements made for their care is included in this report. In addition, there are an unknown number of children in families which have incomes over $8,000 only because both parents are working. How are these children cared for? While the provision of subsidized day care may enable some mothers to work, other mothers who are working now make whatever arrangements they can for the care of their children. What is happening to these children?

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[21] This estimate is low for reasons cited above.

6. Summary and Perspective

The volume of data that have been presented in previous sections may obscure some important results of the study. In this section we have provided a summary in the form of answers to key questions that might be asked of the report.

6.1 How much day care is there?

Estimates can only be made for full-day care since a day care center was considered ineligible for inclusion in the study unless it had at least one full-day enrollee. With this restriction, an estimated 1.3 million children are in full-day care, of whom 710,000 are in day care homes and 575,000 in day care centers. These figures represent all children regardless of family income or working status of mother. There are an estimated 17,500 centers with an average enrollment of 33 full-day children per center and 450,000 day care homes with an average enrollment per home of 1.6 full-day children.

There are many substitutes for the care that occurs in day care centers and day care homes. In this regard, the general population survey, which inquired about arrangements for children of working mothers, only covered families with incomes below $8,000 per year and with children 9 years old or younger, so it is not possible to compare directly the two parts of the survey. However, even in this restricted population of low income families with working mothers and young children it was estimated that

2.2 million children are cared for in the home (all but 300,000 by relatives)

580,000 are cared for by relatives outside the home

30,000 are watched by the mother while she is at work

plus various other in-school and before- and after-school arrangements. There is some duplication in the above counts because they refer to "arrangements" rather than "children," and one child may have more than one arrangement.

What constitutes the entire population of day care, including nonworking mothers and all income levels, cannot be determined from the present study. However, a sample of parents of children in day care centers was asked an income question. The responses were not weighted, so inferences are risky, but 256 out of 550 reported incomes above $8,000 per year. It is clear, then, that the general population survey of low and moderate income families omits a large number of "arrangements" made by working mothers above the $8,000 cutoff.

6.2 What is day care like?

The diversity of facilities, management, ownership and programs in day care centers is striking. Centers (not including day care homes) were classified into three groups by completeness of program. Those with the most nearly custodial programs (Type A) are predominantly proprietary centers (79%) that own their own facilities (77%). This contrasts with the most nearly complete programs (Type C) where 17 percent of the centers are proprietary and where only 18 percent own their own facilities. Type A centers generally do not maintain written activity schedules (18%) while Type C do (91%). Fewer than 10 percent of Type A centers provide physical examinations, dental examinations, vision tests, speech tests, hearing tests, psychological testing and social work; while the percentages for Type C are physical examinations, 27 percent; dental examinations, 30 percent; vision tests, 86 percent; speech tests, 64 percent; hearing tests, 71 percent; psychological testing, 67 percent; and social work, 74 percent.

Type A centers have one certified teacher per 470 full-day children while Type C centers have one per 35 full-day children. Full-day equivalent children per child-related staff person are 15 for Type A and six for Type C. Parents generally do not participate in Type A child care, policy making and fund raising (less than 10% in each activity), but do participate in such activities in Type C centers (28 to 46%).

Average fees tend to be higher in Type C centers, but a smaller percentage of children pay fees because of government and community support.

Emerging from the above comparisons is the impression that existing day care is difficult to characterize in terms of averages or medians. Day care is heterogeneous; and variables such as size, ownership, programs, staff capabilities and fees interact heavily upon each other.

Over half of the centers provide some before- and/or after-school care—about half of those providing such care have a recreational program and about one-fourth have educational or remedial programs. An estimated 87,000 children receive before- or after-school care from day care centers. An estimated 160 school districts provide before- and after-school care for an estimated 200,000 school-age children, mostly for a fee. All together, then, slightly over 100,000 school-age children receive organized care from centers and schools. The number who participate in organized community recreation programs or other types of care are unknown. No attempt has been made here to calibrate the need for before- and after-school care, but the household survey revealed about 1.8 million school-age children of working mothers with family incomes under $8,000 and with children 9 years of age or younger.

6.3 Who staffs day care centers?

An estimated 127,000 paid persons staff day care centers, of whom almost 60 percent are full time and about 80 percent are child-related (counting directors and assistant directors in this latter category). In addition, there are about 5,000 volunteer staff. About 6 percent of teachers and directors have less than a high school education and 27 percent are college graduates.

Salaries are low by most standards, the median salary for teachers being $358 per month. Neither educational level nor salaries appear to differ markedly by ethnicity of full time staff. Median age staff is 36 years and only 3 percent are over 65.

Fourteen percent of centers have someone certified in nursery-kindergarten, 12 percent of centers have certifications in early childhood development and 23 percent in elementary education.

About 70 percent of centers reported little or no difficulty in hiring staff members, an estimate that is important to cost estimates if the day care program is expanded.

6.4 What kind of day care is needed (or wanted)?

Center operators were asked their opinion concerning the needs of their communities for day care. About 45 percent perceived a need for more day care for working mothers and 34 percent for nonworking mothers. Eighty-seven percent saw the need for more full-time day care, 58 percent the need for more part-day care for pre-school children and 73 percent the need for more after-school care. In general, a higher proportion of nonproprietary centers reported needs than did proprietary centers.

Parents interviewed in the household survey (income less than $8,000, children 9 years old or younger) were asked what they expected of a day care program. Provisions listed most frequently were:

	Percent of working mothers	Percent of nonworking mothers
Good care	62	58
Good food	55	56
Safe place to leave child	47	43
Training	38	30
Education (school readiness)	37	28

It is interesting to note that the rankings are identical and that the three provisions listed most frequently are all custodial features.

6.5 What does day care cost?

Properly, a discussion of costs should begin with careful definitions of what constitutes cost and of who pays the costs: the mother, the community, state and local governments, or the Federal government. The operator questionnaire asked for "total annual cost of operating . . ." which was divided by full day equivalent[22] enrollment and adjusted to a monthly basis to obtain average monthly cost of operation per full-time equivalent child. For proprietary centers the unweighted average cost was $38 per month and for nonproprietary centers $95 per month. The two are not entirely comparable because cost of nonproprietary centers includes cost of management which is most likely not included in costs of proprietary centers. Average revenue per full-day equivalent child for proprietary centers was $48 and for nonproprietary centers was $95, the same as average costs. Receipts per month ranged from $33 per full-day equivalent child in category A centers to $110 in category C centers.

6.6 Who pays the bill?

About 52 percent of the revenue of day care centers comes from parent fees (99 percent in proprietary centers and 2 percent in nonproprietary centers). About 19 percent comes from HEW and 5 percent from OEO. About 7.5 percent comes from local governments and 5.5 percent from community organizations. No other source accounts for more than 5 percent. The figures, of course, are subject to both sampling error and response error, which should be kept in mind in comparing them against external sources.

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[22] Counting two halfday children as equivalent to one full-day child.

Also, parent fees are frequently paid by public assistance (17) and partly by public assistance and partly by parents (6). About half of nonproprietary centers reported no revenue received from fees.

6.7 What can be said about demand?

Demand for day care can be discussed in terms of effective demand, that is, the number of enrollments that will be effected under given costs, characteristics of day care, and social and economic conditions. It can also be interpreted in terms of "need". The latter interpretation requires a set of subjective judgments since need for day care cannot be quantified as can need for nutritional elements.

On the other hand, measurement of effective demand requires quantification of the manner in which such things as employment patterns, changing trends toward employment of women, marriage and divorce rates, fertility ratios, and other social patterns reflect themselves in the number of day care slots of specified "quality" occupied at a specified price. The concept is further complicated by the subsidization of centers. Presumably, demand for slots could be greatly stimulated by increasing quality and subsidization.

In spite of the above limitations, this study presents some estimates that have general purpose usefulness to those who are concerned with estimation of demand.

First, day care operators were asked how many children were on their waiting lists. Recognizing the weaknesses in such reporting, the estimate of 124,000 of whom 98,000 are on waiting lists of licensed nonproprietary centers, still has some substantial import. The high number in nonproprietary centers, where fees tend to be low or not charged at all, implies that much of this evident demand might disappear if slots were made available at fees which would approximately replace costs.

Many centers are "above capacity" as determined by the comparison of enrollment plus waiting lists with licensed capacity. Such deficiencies amount to 33,000 for licensed proprietary centers and 108,000 for licensed nonproprietary centers. On the other hand, there are 31,000 available slots (by the same arithmetic) in both proprietary and nonproprietary centers. Evidently, there is some distribution problem in connection with available slots.

We have some estimates of the "need" for day care of working mothers in families with incomes below $8,000 and children 9 years of age or less. It seems reasonable to speculate that the number of arrangements for preschool children provides a rough estimate of potential demand for working low income parents. There are an estimated 3.7 million such arrangements, of which 2.2 million constitute care in the home, 583,000 represent care by relatives outside the home, 500,000 are in day care homes and 240,000 are in day care centers. It should be remembered that, for any number of reasons, the typical day care pattern is multiple arrangements for a substantial percent of the chidren in day care. It appears, therefore, that a logical expectation associated with the expansion of organized day care would be a relative decline in the total number of arrangements.

The degree of substitutability among these arrangements is unknown. However, with respect to preschool children, about 36 percent indicated that they desired no change, 23 percent wanted a change to care in their own homes and 33 percent wanted day care centers. A substantial, but unknown, percentage of the latter group were already in day care centers. Also, care in the home tends either to be feasible because of family composition or infeasible for this income group because of cost. Median fees that working mothers indicated a willingness to pay for the desired change in day care arrangements were $8.60 per week, including 16 percent who indicated they could pay nothing. Eliminating this latter group, the median is about $10. There is little evidence here that massive shifts toward care in centers tend to be substantially higher than the fees which mothers are willing to pay.

It is interesting to note, however, that 27 percent of nonworking mothers indicated a preference for day care centers and 45 percent for care in the home. These figures are in marked contrast with actual arrangements made by working mothers. For nonworking black mothers, the percentages were 52 and 27 for centers and care in home, respectively.

About half of nonworking mothers in the target population had worked since becoming parents. About 500,000 or 10 percent of the nonworking mothers were looking for work at the time of the survey. Thus, an increase in number of employed women coupled with the stated desire for care in centers by 27 percent of them could be reflected in an increase in effective demand.

6.8 If more slots were provided, what would they cost?

Obviously, cost depends upon the nature of the product. No information was gathered on startup cost, costs for new facilities, and so on. Also, there is reason to believe that space costs are inadequately represented in total costs. Respondents tend to overlook space costs or forget that they were charged less than cost or that space was donated to them. With these limitations, the estimated cost per child/month for the most nearly complete day care programs (category C) is about $110 and for the most nearly custodial programs (category A) is around $30 per month. For category B, the large middle class of centers, cost is around $50 per month (costs are $45 and receipts are $56).

One can only speculate on the increases over these figures represented by the marginal costs of making new slots available. Evidently only moderate difficulty is being encountered in hiring staff although qualifications as perceived by operators may not coincide with those of the Federal interagency day care requirements. Clearly, there are substantial departures from those standards with respect to a number of staff personnel.

The availability and cost of facilities, including renovation costs, are highly speculative and no information has been obtained on these items.

APPENDIX C

Excerpts From the Social Security Act

* * * * * * *

Title IV—Grants to States for Aid and Services to Needy Families With Children and for Child-Welfare Services

Part A—Aid to Families With Dependent Children

* * * * * * *

STATE PLANS FOR AID AND SERVICES TO NEEDY FAMILIES WITH CHILDREN

Sec. 402. (a) A State plan for aid and services to needy families with children must—

* * * * * * *

(15) provide—

(A) for the development of a program for each appropriate relative and dependent child receiving aid under the plan, and each appropriate individual (living in the same house as a relative and child receiving such aid) whose needs are taken into account in making the determination under clause (7), with the objective of—

(i) assuring, to the maximum extent possible, that such relative, child, and individual will enter the labor force and accept employment so that they will become self-sufficient, and

(ii) preventing or reducing the incidence of births out of wedlock and otherwise strengthening family life,

(B) for the implementation of such programs by—

(i) assuring that such relative, child, or individual who is referred to the Secretary of Labor pursuant to clause (19) is furnished child-care services and that in all appropriate cases family planning services are offered them, and

(ii) in appropriate cases, providing aid to families with dependent children in the form of payments of the types described in section 406(b)(2), and

(C) that the acceptance by such child, relative, or individual of family planning services provided under the plan shall be voluntary on the part of such child, relative, or individual and shall not be a prerequisite to eligibility for or the receipt of any other service or aid under the plan,

(D) for such review of each such program as may be necessary (as frequently as may be necessary, but at least once a year) to insure that it is being effectively implemented,

(E) for furnishing the Secretary with such reports as he may specify showing the results of such programs, and

(F) to the extent that such programs under this clause or clause (14) are developed and implemented by services furnished by the staff of the State agency or the local agency administering the State plan in each of the political subdivisions of the State, for the establishing of a single organizational unit in such State or local agency, as the case may be, responsible for the furnishing of such services;

* * * * * * *

Part B—Child Welfare Services

* * * * * * *

PAYMENTS TO STATES

Sec. 422. (a) From the sums appropriated therefor and the allotment available under this part, the Secretary shall from time to time pay to each State—

(1) that has a plan for child-welfare services which has been developed as provided in this part and which—

* * * * * *

(C) provides, with respect to day care services (including the provision of such care) provided under this title—

(i) for cooperative arrangements with the State health authority and the State agency primarily responsible for State supervision of public schools to assure maximum utilization of such agencies in the provision of necessary health services and education for children receiving day care,

(ii) for an advisory committee, to advise the State public welfare agency on the general policy involved in the provision of day care services under the plan, which shall include among its members representatives of other State agencies concerned with day care or services related thereto and persons representative of professional or civic or other public or nonprofit private agencies, organizations, or groups concerned with the provision of day care,

(iii) for such safeguards as may be necessary to assure provision of day care under the plan only in cases in which it is in the best interest of the child and the mother and only in cases in which it is determined, under criteria established by the State, that a need for such care exists; and, in cases in which the family is able to pay part or all of the costs of such care, for payment of such fees as may be reasonable in the light of such ability,

(iv) for giving priority, in determining the existence of need for such day care, to members of low-income or other groups in the population, and to geographical areas, which have the greatest relative need for extension of such day care, and

(v) that day care provided under the plan will be provided only in facilities (including private homes) which are licensed by the State, or approved (as meeting the standards established for such licensing) by the State agency responsible for licensing facilities of this type, and

(vi) for the development and implementation of arrangements for the more effective involvement of the parent or parents in the appropriate care of the child and the improvement of the health and development of the child.

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APPENDIX D

Excerpts From Regulations of the Department of Health, Education, and Welfare Concerning Child Care Services Under Title IV of the Social Security Act

Code of Federal Regulations, Title 45, Chapter II

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Part 220—Service Programs for Families and Children: Title IV Parts A and B of Social Security Act

Subpart A—Mandatory Provisions

* * * * * * *

MANDATORY SERVICES APPLICABLE TO TITLE IV, PART A

* * * * * * *

§ 220.18 *Child care services.*

(a) Child care services, including in-home and out-of-home services, must be available or provided to all persons referred to and enrolled in the Work Incentive Program and to other persons for whom the agency has required training or employment. Such care must be suitable for the individual child, and the caretaker relatives must be involved in the selection of the child care source to be used if there is more than one source available. However, when there is only one source available, the caretaker relatives must accept it unless they can show that it is unsuitable for their child. The child care services must be maintained until the caretaker relatives are reasonably able to make other satisfactory child care arrangements.

(b) Progress must be made in developing varied child care resources with the aim of affording parents a choice in the care of their children.

(c) All child care services must meet the following standards:

(1) *In-home care.* (i) Homemaker service under agency auspices must meet the standards established by the State agency which must be reasonably in accord with the recommended standards of related national standard setting organizations, such as the Child Welfare League of America and the National Council for Homemaker Services.

(ii) Child care provided by relatives, friends, or neighbors must meet standards established by the State agency that, as a minimum, cover age, physical and emotional health, capacity and time of the caretaker to provide adequate care; hours of care; maximum number of children to be cared for; feeding and health care of the children.

(2) *Out-of-home care.* Day care facilities, used for the care of children, must be licensed by the State or approved as meeting the standards for such licensing and day care facilities and services must comply with the standards of the Federal Interagency Day Care Requirements and the requirements of section 422(a)(1) of the Social Security Act (see § 220.56).

(d) Both in-home and out-of-home child care provided for persons referred to the WIN program must be a service cost rather than an assistance cost.

* * * * * * *

Requirements Applicable to the Work Incentive Program Under Title IV, Part A

§ 220.35 *Work incentive program.*

(a) *State plan requirements.* Effective July 1, 1968, unless a State is prevented from complying on that date by State statute, and then no later than July 1, 1969, a State plan for AFDC under part A of title IV of the Social Security Act must provide that:

* * * * * * *

(2) No referral will be made to the Manpower Agency for participation under a Work Incentive Program of an individual described in subparagraph (1) (i) of this paragraph (a) if he is:

(i) A person with illness, incapacity, or advanced age;

(ii) A person so remote from any project under the Work Incentive Program that he cannot effectively participate therein;

(iii) A child attending school full-time;

(iv) A person whose presence in the home on a substantially continuous basis is required because of the illness or incapactiy of another member of the household; or

(v) A person whose presence in the home is required because adequate child-care services cannot be furnished.

* * * * * * *

Subpart B—Optional Provisions

* * * * * * *

Services in Aid to Families With Dependent Children

§ 220.52 *Coverage of optional groups for services.*

(a) The agency may elect to provide services to all or to reasonably classified subgroups of the following:

(1) Families and children who are current applicants for financial assistance.

(2) Families and children who are former applicants or recipients of financial assistance.

(3) Families and children who are likely to become applicants for or recipients of financial assistance, i.e., those who:

(i) Are eligible for medical assistance, as medically needy persons, under the State's title XIX plan.

(ii) Would be eligible for financial assistance if the earnings exemption granted to recipients applied to them.

(iii) Are likely, within 5 years, to become recipients of financial assistance.

(iv) Are at or near dependency level, including those in low-income neighborhoods and among other groups that might otherwise include more AFDC cases, where services are provided on a group basis.

(4) All other families and children for information and referral service only.

(b) All families and children in the above groups, or a selected reasonable classification of families and children with common problems or common service needs, may be included.

CHILD WELFARE SERVICES

* * * * * * *

§ 220.56 *Day care services.*

(a) If day care services are included under title IV–B, they must meet the standards required in § 220.18(c)(2), and in addition, the State plan must indicate compliance with the following:

(1) Cooperative arrangements with State health and education agencies to assure maximum utilization of such agencies in the provision of health and education services for children in day care.

(2) An advisory committee on day care services as set forth in § 220.4(b).

(3) A reasonable and objective method for determining the priorities of need, as a basis for giving priority, in determining the existence of need for day care, to members of low-income or other groups in the population and to geographical areas which have the greatest relative need for the extension of day care.

(4) Specific criteria for determining the need of each child for care and protection through day care services.

(5) Determination that day care is in the best interests of the child and the family.

(6) Provision for determining, on an objective basis, the ability of families to pay for part or all of the cost of day care and for payment of reasonable fees by families able to pay.

(7) Provision for the development and implementation of arrangements for the more effective involvement of the parent or parents in the appropriate care of the child and the improvement of his health and development.

(8) Provision of day care only in facilities (including private homes) which are licensed by the State or approved as meeting the standards for such licensing.

APPENDIX E

Excerpts From the Report of the Auerbach Corporation, "An Appraisal of the Work Incentive Program," Dated March 15, 1970

B.3 Child Care

Child care *cannot* be thought of as little more than a supportive service available to WIN mothers. The answers to far reaching questions about child care, the working mother, the relative merits of parental versus out-of-home care, and the meaning of child development are tied to the nature and potential success of WIN. In addition, child care not only poses one of the thorniest problems to WIN mothers but also presents one of the basic paradoxes of WIN and AFDC: It costs more to provide "quality" day care to children than most states are willing to pay mothers to take care of their own children. Therefor, the commitment to WIN on a large scale may result more in a transference of funds from the mothers to child care vendors with little reduction in actual costs, except for mothers with small families who can earn enough to offset the costs of the child care, or who can find care which will be less expensive to themselves and the state.

Yet, most states have apparently made a commitment to the concept that it is better to pay to have the mother work than to pay the mother not to work. In many states, mothers can obtain allowances which will purchase most of the day care available, and supposedly, this liberal allowance—coupled to the availability of WIN training—could transform large numbers of AFDC recipients into working mothers. It is questionable if this will succeed and also meet the goal of the legislation:

> . . . It is expected that the individuals participating in the program established under this part will acquire a sense of dignity, self-worth, and confidence which will flow from being recognized as a wage-earning member of society and *that the example of a working adult in these families will have beneficial effects on the children in such families.*

In the first place, it is not clear as to what the long-range effects will be on children, removed from their parents, and placed in group care. People are still concerned with the *value* of providing day care. Health and education authorities are continually discussing the merits of all-day care, because children growing up in groups are different from children who do not grow up in groups.[1] Young children who spend most of their time with a group of other children (and "day care" covers most of a young child's waking hours) learn to function in a group environment; they do not necessarily function equally well without the group. There is a possibility that "day care" and other full-time group facilities for children may develop too conforming a group of children—children who are more comfortable in the group setting and who will find it difficult to function alone. The question is also asked: what's the difference between group care in a day care center and group care at home (meaning a family where there are many children)? First, most WIN families are not large groups.[2] Secondly, a group of children ranging many years in age is not similar to a group of children within the same span of years because children of different ages are at completely different skill levels and do not participate in the same activities together all day long. The relationship of a three-year-old to his siblings cannot be the same as his relationship to other three-year-olds in a day center by virtue of physical differences alone.

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[1] See, for example, "Children in Group Day Care, The Effect of a Dual Child-Rearing Environment," by Elizabeth Preston and Joan Harris, Welfare Planning Council, Los Angeles Research Report No. 20.

But even more essential than the conceptual question of group care, which is after all the same for mothers who presently work as for AFDC mothers who do not, is the question about the quality of care children may receive as a result of the WIN program. So long as the compulsory provisions are contained in the legislation, and there is even the possibility of compulsion, though it may not be specifically exercised, the Welfare Department must assume responsibility for the quality of care which children receive. This responsibility is clearly outlined in the HEW guidelines:

> 44.3 *Planning for Child Care Arrangements.*—A mother is not to be referred to the Work Incentive Program unless and until ***adequate*** [3] child care arrangements are available. The agency must therefore discuss with the mother the needs of her child and the facilities that are available. The mothers should receive an orientation about the types of child care available so that she can carry her role more effectively. . . .
>
> 46.1 *Agency Considerations.*—The welfare agency must be prepared to furnish ***adequate*** [3] child care services for the children receiving AFDC whose mothers or other child care adults are engaged in training or employment through the Work Incentive Program. In fulfilling this obligation, it is desirable that a variety of methods of child care be available so that a suitable plan can be made for each child. In many localities this will necessitate planning for additional resources of all types—family day care homes, group day care homes, day care centers, homemaker services, and arrangements for the care of children by relatives, friends, and neighbors. . . .
>
> All types of child care used by the agency must meet applicable Federal and State requirements.
>
> Day care facilities used for the care of children must be licensed by the State or approved as meeting the standards of such licensing and must comply with standards of the Federal Inter-Agency Day Care Requirements. . . .
>
> In-home types of child care must meet standards established by the State agency for such care—e.g., homemaker service, and care by relatives, friends or neighbors.
>
> 46.2 *Parent Involvement.*—Early discussion with parents or parent groups as to the kind of care they would like for their children is recom-

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[2] The mode for the number of dependents in the AFDC household is one, and the median slightly over two; see Table B-2, Page B-42.

[3] Our italic.

> mended. This can be done in various ways, such as neighborhood discussion groups, block-by-block surveys in selected neighborhoods, meetings with representatives of client groups, and direct involvement of parents in the planning process.
>
> *Before referral to the Work Incentive Program,*[4] welfare workers will confer with parents individually and in groups regarding available resources and assist them in choosing the type of care best suited to the needs of their children. . . .
>
> After the child is enrolled in a child care facility or program, there should be periodic discussion with the parent's evaluation of the plan. Mothers should be given opportunities to voice any worries or apprehensions about their children. . . .

But there is considerable doubt as to the extent to which this responsibility is being exercised. *National VOICE for Children,* which is published monthly by the Day Care and Child Development Council of America, stated in its issue of June 1969:

> From the very beginning, there has been concern that the WIN Program might result in a rash of second-rate, custodial day care programs. It seemed all too likely that the Congressional pressure to implement the manpower training aspect of the program would leave room for only secondary consideration to be given to the needs of children.
>
> As of the end of the program's first year of operation, in June, it was still too early to know for sure how serious the problem of quality was going to be. Although some 85,000 children had receive care as the result of WIN, over three-quarters of them were school age, and the main concern is over the quality of programs for preschoolers.
>
> Further complicating the picture is the fact that no one (including either the regional or Washington offices of HEW) seems to have very much information on either the kinds or quality of children's service being offered under WIN. Reports flowing into the Council offices from around the country indicate a very mixed picture. In at least some communities, civic and professional leadership has rallied to work with public welfare officials in planning top-flight day care programs under WIN. In many others, however, children have been shoved into makeshift arrangements of doubtful quality.

Our own findings raise even more doubts about the extent to which WIN mothers may be benefiting themselves and their families through WIN. In the cities selected for the child care studies, slightly over two hundred mothers were interviewed to determine their need for child care, what they were told about child care, and how it was obtained. Our results show that not only did the overwhelming majority (eighty-eight percent) arrange their own plans, independent of welfare, but that most (eighty percent) were informed by their caseworkers that it was their responsibility to do so. Even more discouraging is the fact that the majority of mothers (eighty-three percent) who were informed about child care by their caseworkers were left with the impression that they could make use of any service they wanted; approved services were not required.

That mothers were left to their own devices to secure plans, were told it was their responsibility to do so, and more important, that they were either told, or thought they were told, that any plan could be used, is in clear violation of the Title IV legislation, the Regulations under Section 220 of

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[4] Our italic.

Chapter II of Title 45 of the Code of Federal Regulations, the Federal Interagency Family Care Standards, the HEW Guidelines, and a basic concern for the well being of the children—the purpose of the legislation in the first place.

To say that most Departments of Welfare were simply not interested enough to accept the responsibility would be, however, a gross simplification. There are many reasons why the burden of both effort and responsibility has been shifted from the department to the mothers. These reasons include the inability of departments, because of staffing, to provide the assistance called for; the lack of facilities, making such attempts futile; and the desire of mothers to secure their own care, rather than accept that proffered by their caseworkers. This section will examine this entire question of WIN in relation to child care, and the problems in carrying out the legislated responsibility by Welfare offices.

B.3.1 Child Care: Its Availability

Before considering the question of available care for WIN mothers, some consideration must be given to the existence of child care for working mothers, now estimated at over 9.5 million.[6] *WIN cannot be studied in isolation; the AFDC mother must largely use and compete for those resources which are available to all mothers.* Basically, the resources fall into four standard groups: In-home care (or baby-sitting), The Family Day Care Home, The Group Day Care Home, The Day Care Center. Except for the last, the Day Care Center, it is difficult to estimate the number of formal and informal arrangements available. The working mother does not necessarily have to make use of licensed centers, and the existence and usage can only be determined by special survey.

One such survey was conducted in Baltimore (1964) where it was found that seventy-seven percent of the children of working mothers are cared for in their own homes; only five percent made use of day care centers. The study determined moreover that eighteen percent of the care that the mothers had arranged was "totally inadequate." To bring this care up to an acceptable minimal standard would cost over three million dollars in that city alone.[7] In our evaluation of cities, similar observations were found. In one community, for example, the Department of Licenses had found that of the 164 identified day care homes in operation, most had not been licensed, and most plans were illegal.

A special study conducted by the Child Welfare League of America in six communities found that:

> Day care of any sort is extremely limited in availability. Despite ever increasing numbers of working mothers and widespread desire for a good child care service, the number of day care centers through the country have, since the end of World War II, remained constant or even declined. In our study we find that two-

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[6] As of 1968 the percent of women in the labor force had reached 37.39% (twenty-six million) with 9.6 million of these women with children under eighteen years of age.

[7] *Report of Survey of Resident Working Mothers and the Day Care of Their Children in Baltimore City in 1964,* Division of Child Day Care, Baltimore City Health Department.

> thirds of all working mothers say they know of no day care center near them, and an even higher proportion say this of family day care homes. Many have searched in vain.[8]

Why care is so limited is complex. Day care centers presently account for only four percent of children who have been placed in WIN child care. They need to be made more widely available, and could possibly be developed by private enterprise. Nearly two-thirds of the approximately 4,500 day care centers identified by the Children's Bureau of the Department of Health, Education, and Welfare are proprietary—less than ten percent were wholly supported by public agencies. In fact, recent chains of franchised day care centers are being developed by entrepreneurs, some of whose main business is seemingly far removed from child care.[9] But the need still remains.

The problem may be one of finance. It has been estimated that to comply with the Federal Interagency Day Care Standards—which are proposed for all facilities serving WIN and welfare children—would cost over two thousand dollars a year per child.[10] This is more than can be paid by local agencies. Consequently, centers may be developed by private sources only for mothers who can pay themselves (since the standards would not apply). Such centers would not be available to WIN children, and facilities would be limited for them though the situation might improve for the working mother not on welfare.

One of the causes may relate to the fundamental question regarding group care versus individual care, as discussed earlier. Group care in the United States is usually considered in terms of education. Mothers who leave their children in pre-school nurseries, usually in middle- and upper-middle class neighborhoods, are more concerned about the training (the middle-class, headstart program) than about the hours. (In other countries, familiarity and acceptance of group care for younger children are more widespread.) In addition, day care is usually thought of only for the group from the age of three to six. Care for younger children cannot usually be found, except from relatives, while care for school age children is usually through afternoon sitters, or a latch-key arrangement. Our study of AFDC mothers has shown an age shift for working mothers. Since the shift is with increasing age, we can assume the children are also older (see Figure B–2).[11] This could be interpreted as showing that as the children enter school the mother begins to accept and want work. It probably means, however, that informal care is easier to provide at this age.

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[8] Florence A. Ruderman, *Child Care and Working Mothers. A Study of Arrangements Made for Daytime Care of Children,* (New York: Child Welfare League of America, 1968) p. 344.

[9] The Minnie Pearl Fried Chicken Chain has recently begun opening a string of day care centers. In addition, advertisements for franchised day care operations may be found, on occasions, in the *Wall Street Journal.*

[10] Information obtained from HEW contract monitor.

[11] Since the area curves for employment and age are both based on 100 percent of their respective categories, it is not expected that the area under the curves should be equal.

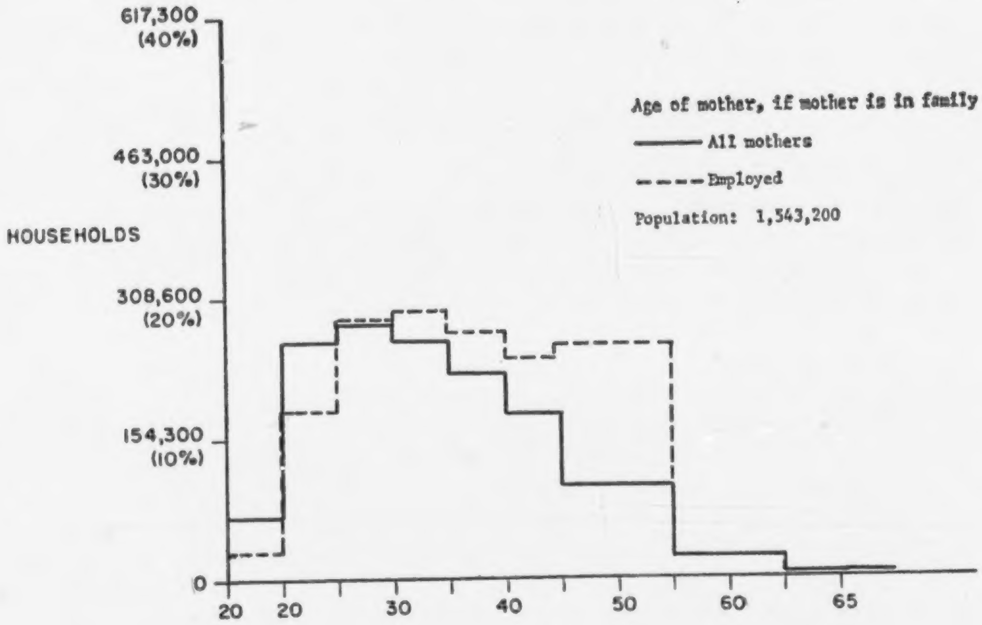

Figure B-2. AFDC Mothers: Distribution by Age and Employment

Whatever the reason, approved day care centers, or approved arrangements of any sort are generally limited in the United States. There are some areas which seem to have adequate facilities, as did two cities in our sample, there are other areas which have virtually no care available. But nationally, and WIN is a national program, there is little care available outside the family and informal baby sitting.

B.3.2 Barriers to the Development of Child Care

The development of one type of child care cannot solve all child care problems: there is no one type (center, family day care homes, in-home sitter) which fits the needs of all children or the needs of all cities. It may be that several types of care need to be available for WIN mothers. But at present, barriers exist for the development of most forms of child care. Hopefully, many of the barriers are not permanent problems which will always be part of the care. They are problems which presently exist and which could be coped with in future planning.

B.3.2.1 Barriers to the Development of Family Day Care Homes

There are two general ways of recruiting family day care homes:

Type A.—get the name of a person the mother wants to care for her child and license that person

Type B.—find people who want to care for children in their own homes (or who can be available to go to the child's home) and license them

Some WIN programs allow both types of family day care; some will "approve" group A but will license only the second group. The term family day care does not necessarily include both.

B.3.2.1.1 Problems Developing the Type A Care

Caretakers are reluctant to become licensed. They may readily agree to babysit, but when they learn that it will involve contact and paperwork with the licensing agency, they are frightened or skeptical and may not want to proceed with the agreement. Babysitting is one thing, but licensed day care, even though it is partly for the benefit of the caretaker (to see that she is regularly paid, for example) is quite another. Until word gets around in the community that licensed day care is "okay", there is apt to be considerable reluctance to this unfamiliar procedure.

AFDC mothers in particular may be afraid that their check will be cut off or reduced if they start making money by babysitting. Project residents are further restricted as to their income.

A further problem is that physical examinations are often required of mothers who want to care for children in their homes. (Strangely, such examinations are not required of women who will care for the same children in the home of the mother.) These examinations must often be secured at the expense of the mother; there is usually a long delay between the examination and the approval of results by the licensing authority; and many women simply do not want to subject themselves to a "personal" examination in order to care for children. Though examinations themselves cannot be considered a minor barrier, they are certainly a contributing one.

B.3.2.1.2 Barriers to the Development of Type B Care

Ordinarily homes are not recruited for WIN specifically; they are places which have contacted the licensing agency desiring licensing, or they are places found by the agency to be caring for children, and have then been forced into becoming licensed. In one city, where there has been an effort to recruit family day care mothers for WIN specifically, the majority of licensed mothers are still from these other sources. Apparently, it is difficult to find a large number of mothers who wish to become family day care mothers. Day Care Workers cannot spend their time recruiting when there are so many other duties which need their attention.

The major difficulty, however, is matching up a licensed mother with a mother who needs child care. All cities experience this difficulty, regardless of the number of available licensed homes.

The day care home may be inconveniently located for use by the WIN mother. It may be licensed for children of specified age or sex (the day care mother can usually determine this age and sex of the children she wants to care for). The number of children in the home may be a barrier; the mother may be looking for a place to care for two children, and the licensed home only has space for one. Or the mother's child may be under 2½ years old which would restrict the day care mother (under certain state laws) from accepting any other children. This would consequently restrict her income, since she cannot accept more children, so she refuses to accept him. The day care mother may charge more than the mother can afford, an occasional problem in WIN.

B.3.2.1.3 Barriers Common to Both Types A and B

The difficulty most commonly mentioned by WIN programs using family day care homes is the existence of personality problems between the day care mother and the natural mother. Their expectations of each other cause problems which interfere with the agreement. The WIN mother has her own idea of how the child should be cared for, and the day care mother has her own different idea of how to best care for the child. Both become dissatisfied to the point where they dislike each other.

One of the better programs recognizes this problem and tries to make sure both mothers have come to an understanding before care is begun, but most child care programs do not include such detailed preliminaries. Even in cases where the caretaker and natural mother know each other before arranging WIN child care, the relationship between them does not always remain a good one.

These problems, and others which occur (payment delays, mothers changing sitters, illness), produce large hidden caseloads. Who takes care of these problems? Who answers phone calls from the sitters? Who has responsibility for all aspects of child care? Caseworkers and child care workers are only beginning to learn the full meaning of arranging child care. Program guidelines did not seem to anticipate nor specify how to deal with the increased caseload due to child care. What usually happens is that the problems in a child care arrangement build up to a point where the agreement is cancelled and new plans are established. The WIN/Welfare team may or may not be aware of such a change.

Supervision of child care is, at present, impossible. Areas of responsibility are not well defined in most programs and the number of staff is inevitably too small to find child care for WIN mothers in addition to solving problems of on-going care. Furthermore, there is sometimes resentment between mothers and caretakers regarding any supervision. Mothers often feel they should have the privilege non-Welfare mothers have of arranging their own child care without anyone saying whether or not it is adequate or suitable. Particularly where the caretaker is a relative of the child's, the mother is apt to feel that the supervising person is saying, in effect, "We don't trust you to make adequate child care plans." Mothers and caretakers do not see supervision for the purposes it is intended: to protect those involved and to assure that services are being, or can be, provided where they are being paid for by Welfare.

Generally, family day care is essentially the purchase of sitters. Welfare should instead be involved in the purchase of a *service*.

B.3.2.2 Barriers to the Development of Training Programs for Child Care Aides

Child care is not universally seen as a desirable job. People who want to work want a job with prestige, or at least some fringe benefits. Child care carries neither. There exists an attitude that anyone can take care of children—that it requires no special skill or training. Child care aide positions are among the lowest in salary. There are no pension plans, holidays, lunch hours, paid vacations, company picnics, or any other fringe benefits. There is often not even the company of other adults or the enjoyment of talking with one's co-workers.

Some training programs have learned that trained day care mothers or child care aides do not stay around to service WIN enrollees. Once they are licensed, day care mothers are quick to get better jobs, expand operations and negotiate with the general public rather than take only Welfare children (more profit involved with non-welfare). So unless Welfare can guarantee good jobs after training, they run the risk of losing the trainees.

A mid-western city attempts to solve this problem by putting day care mothers on salary, paying a certain salary regardless of the number of children placed in the home. There are always a few empty slots, but at least the day care mothers are available whenever there are WIN mothers who need the service.

In a few cities there aren't enough jobs for child care aides, so when training programs prepare large numbers of aides for jobs, they have to find other jobs after training. This was the situation in an eastern city where the few available jobs didn't pay adequately, and Welfare could not guarantee income for the trained aides. In addition, some child care jobs required civil service exams which trained aides couldn't pass.

Thus, there are two opposing views of the job: the aides themselves find the job without status, the child care experts consider it highly important. Because of this, a "mismatch" between qualifications desired and qualifications available results. In one eastern city, for example, a group of trainees screened out as the best of the class failed to be selected by the directors of child care programs as "promising." The rewards of the position must be brought in line with the qualifications desired.

The amount of training given in a short program cannot be extensive, and child care specialists usually find such programs insufficient for the trainees' needs. Many mothers have enough problems with their own children: they do not consider the extra problems they will have to face with the children who would be placed under their supervision were they to become family day care mothers or child care aides. It is also unreasonable to expect a mother with problems suddenly to become emotionally stable. Yet, women with an uneven temperament with children enter programs to become aides.

In an eastern city, where the Department of Health licenses day care homes, the Public Health Nurses often know of the person to be licensed through previous contact. In many cases, they feel that person is mentally unstable, so they will not license her for family day care. Here is one city with personnel interested in child care, wanting to license more homes to assure adequate care for more children, providing a free in-service training course, yet held back by many health factors alone:

One of the highest TB rates in the county

Many unsuitable homes, in terms of health and safety for child care; one home was found where six children were sharing one bed.

One home which applied for family day care was found, according to the staff of that city, to have a dirt floor with a horse in the living room.

Even if mothers were perfect day care mothers, they could not necessarily be licensed because of the housing situation. In a western city, Welfare had to move mothers to other housing so that they could become licensed to provide care. A northeastern city moved some mothers in housing projects down to the first floor to meet requirements.

The major problem in training aides is recruiting and keeping enough people to make the training worthwhile. It simply is not an efficient or highly effective way to get quality child care resources. The expense involved in such a program does not seem worthwhile, even on a long-range basis. Training programs just have not added significantly to the resources which are so desperately needed.

B.3.2.3 Barriers to the Development of Day Care Centers

Most of the barriers to the development of space in large group child care facilities are related directly to the small number of such facilities. There are very limited facilities and when WIN buys out a number of slots, fewer non-welfare mothers can be served. Staff of public facilities see this practice as unfair because they are helping to keep some mothers off Welfare by providing low-cost child care, and WIN only adds to the total number of mothers needing child care without adding appreciably to the child care resources. This is one reason why it may be difficult to purchase abundant spaces in already established non-profit centers. The need is for an increase in the number of centers.

Many centers are glad to have the guaranteed income from Welfare under purchase of care contracts, but even some of those centers do not get what they bargained for. They are somewhat distressed by the instability of plans; a child enrolled while a mother is in Orientation may not be in attendance when the mother changes components, and another WIN child may be put into that slot. While centers are established to fill the needs of the mother, they are just as concerned about the needs of the child; they feel that continuity of care is important and that the individual child and the group he is in would gain more from a full-time enrollment, rather than a temporary replacement kind of enrollment.

Child care facilities which are established for specialized care, sometimes suffer from less than full enrollment. The CEP center in an eastern city, licensed and funded for seventy-nine, had an enrollment of fourteen all winter. If children of non-CEP parents had been allowed to enroll, perhaps more efficient use could have been made of the center. The point is that centers planned only for WIN parents may not be economically feasible. In one city, for example, Welfare purchased care in many centers, and has open slots in eight centers. There is no way of assuring maximum use of facilities.

As a successful program in an eastern city has proved, the number of day care centers can be increased, despite financial and legislative barriers, if enough people are committed to the idea. Regulations can be changed; money can be appropriated. There are barriers of this type, in all cities. These barriers may not be as difficult to overcome as the problem of staff. Any significant increase in child care facilities will readily show up the lack of trained staff. Directors and head teachers are so scarce that problems of financing and licensing would seem small next to lack of staff. There are relatively few colleges and universities which offer majors in Early Childhood Education. Of course, if there were more jobs available for graduates in that field, and if the salaries were competitive with other fields, more colleges might offer that major. As the situation now stands, the number of graduates from Early Childhood Education (Child Development Nursery School Management, or whatever name it is given), who have also had a few years experience and could therefore qualify as Head Teachers and Directors, is too small to meet the present need, much less any expansion in the number of facilities.

One city, which analyzed the barriers to large group care found:

not enough outdoor space to meet requirements substandard housing which is costly to renovate

state regulations for group day care which have met opposition and have not passed into law

The major barrier is still lack of training of staff. There is a definite interest among present day care staff to receive further training, but even that is difficult to fund and carry out.

Another clue to the difficulties in expanding child care facilities can be seen from the experience of this same city. Opposition to updating and adopting regulations for group day care came from proprietary operators who don't want state laws because it would cost them more to operate if they had to meet more specific regulations. As mentioned earlier, the same situation exists with respect to the Federal Interagency Day Care Standards. The objection is to staffing patterns, rather than to physical facilities.

The problem of physical facilities may be limiting in some areas, though probably not as critical as would be indicated by the number of times it is used as an excuse. The greatest stated problem is in meeting the various local ordinances which, according to some staffs, are prohibitive. Some examples are: windows no more than "x" feet from the floor, sanitation facilities for children, appropriately scaled, sprinkler systems, fireproof construction, etc. Staff feel that in these areas private facilities cannot be profitably constructed and that the majority of existing buildings are inadequate.

These problems are most severe in the inner city where most welfare mothers live. Because of the problems with the physical facilities and the possible unprofitability of centers, few facilities can exist in these neighborhoods—except for OEO projects, such as Head Start.[12]

Exactly how many of these problems could be overcome if staff were adequate and if day care staff took the initiative to eliminate the problems is difficult to determine.[13] Some areas have made successful attempts to reduce standards; others have not. Few areas, however, have the trained staff available to make a coordinated effort at planning facilities, to meet with public and private officials, and to examine and license facilities. One problem is that though most welfare workers are reimbursed by the Federal Government for seventy-five percent of their salaries, those involved in licensing and inspections are not. The result is that not only is the development of centers retarded, but also their licensing and inspecting.

Regardless of the regulations or procedures for ensuring that adequate child care is made available to the mothers, much depends on the caseworkers. They are the ones who often approve the plans. In many cities, including some with good support divisions, the caseworker is solely responsible for approving the mothers' plans. These caseworkers often have little knowledge of child care, even in the informal sense. Consequently, all the elaborate procedures and regulations are meaningless, if procedures are not set up in WIN to ensure compliance.

B.3.3 Special Child Care Problems Associated With WIN

In addition to the barriers to the development of facilities, and the particular problems for the poor mother in the inner city, some special problems exist for the WIN mother. These problems can be critical to the program, so much so that even in one eastern city where vacancies did exist in centers, they were not being used by WIN mothers. In another, family care centers had vacancies, but mothers did not know of them or use them. This despite the fact that a special day care unit existed in this program to help mothers, and was physically located along side of caseworkers in the crowded welfare office. The reasons are to be found in the structure of welfare and WIN.

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[12] In one city, a Head Start program had vacancies, but it was not available to WIN mothers because of some financial entanglement.

[13] In one eastern program, welfare staff have failed to attend the sessions arranged by the fire marshal's office to discuss and possibly change day care ordinances.

B.3.3.1 Feelings of Mothers Toward Welfare Department

Some Welfare Departments justify their lack of involvement in the development of plans with reasons such as, "Our first responsibility is to make the mother self-sufficient and this begins with letting her find her own facilities. We can't continue to hold her hand. . . ." Though this is in fact the legitimate feeling of some caseworkers and does apply to some mothers, it seems to be more often a manufactured reason to avoid providing assistance, or at least to justify why assistance cannot be provided—though the regulations clearly call for it.

There is, of course, some validity to the statement, based on experience which the caseworkers have had, and on our own observations in the field. Many mothers do prefer to develop their own plans, and are in fact distrustful of centers and services which are offered to them. They want to know the person providing the care, and they want it in their neighborhoods. Some mothers simply do not want day care; they are afraid of the training or lack of it that the children are receiving. Some are even afraid that their children are being indoctrinated in such centers.

These mothers represent a minority of those on AFDC, at least from our sample. Most mothers know little about child care options. They are familiar with sitters, relatives, or perhaps in-home care furnished by friends; only rarely do they know of available licensed family or group day care centers. Moreover, for many of the mothers on AFDC and in WIN the need is more complex than can be solved by a simple center approach.

B.3.3.2 Dissemination of Information

Occasionally, the problem is that the Departments of Welfare do not know of resources which do exist. Some are reluctant to become involved in the development or analysis of the community. More often, however, the day care section does have adequate information about the city, does analyze centers for vacancies and quality, and does publish lists. But the information is not disseminated and is not used. The problem is more often dissemination than the lack of lists themselves.

Several areas had excellent child care divisions which maintained accurate and up-to-date lists of all centers. In one area in particular the child care unit not only listed those available, but also was responsible for the development of many on the list. Nonetheless, the lists, though disseminated to each division, were not being made available to the caseworkers; they had little understanding of what facilities were available or how to use them.

The fact that a city has a 4–C program does not necessarily solve this problem. Of the four cities evaluated with 4–C programs, many caseworkers—who are the ones who actually help the mothers—did not know of the existence of facilities, despite the fact that information was being developed. Caseworkers must have a better understanding of what is available, not just the child care unit.

Many programs were gaining an appreciation of the problem of disseminating information and there were sporadic examples of attempts to alleviate at least this problem. One city intended to place one child care specialist within a team of every ten AFDC caseworkers to ensure the presence of an informed, competent and interested child care person at the point where contact was made with clients. Other programs were beginning to distribute lists of child care resources to the persons who could effectively utilize them. However, the great majority of the programs continued to show a disinterest or insensitivity to child development and child care and continued the policy that maintained that WIN applicants were ultimately responsible for their own child care arrangements. The "helping hand" is still not being extended.

B.3.3.3 ES and WIN Coordination

The internal coordination problems within Welfare do not compare to the problems of coordination between Welfare and WIN/ES. Many times no child care plans were made for the WIN referrals before sending the cases to WIN for enrollment; other times the child care plans arranged prior to referral were only tentative and broke down or dissolved by the time the referral was actually enrolled. This last case was especially evident where the Welfare Department was referring more persons than the WIN Program could possibly enroll. If child care arrangements broke down or were disrupted during the WIN enrollees's active involvement, the WIN team members were often unable to handle the situation, especially within time to prevent the participant from missing classes or dropping our provisionally from a component. The channels of communication between WIN and Welfare were not established to tolerate crisis situations such as these. Again, the WIN participant customarily had to struggle to alleviate the situation, if possible.

B.3.4 Summaries of Barriers to Child Care

The problems impeding the development of sound child care for mothers varied from area to area. In some areas only a few problems could be identified; in others numerous problems were found. The chart in Table B–1 illustrates these problems on a project-by-project basis. The chart indicates the existence of services or barriers in the project shown on the horizontal axis in the categories shown on the vertical axis.

B.3.5 Need of WIN Mothers

Of the mothers on AFDC, over eighty percent have some combination of school age and pre-school age children for whom some care is probably required.[14] Fewer than fifty percent of these households have only pre-school children. Out of the total of one and one half million AFDC households only 431,800 have pre-school children exclusively; another 615,600 have school age children exclusively; and 548,400 have some combination of both school age and pre-school age children—as shown in Table B–2.[15]

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[14] Households without a child older than sixteen.

[15] Figures include households with children older than 16, e.g., A plus A, C. We assume that care is not required for the "C" group.

These figures indicate that the problem for the *potential* WIN population is not only for day care for pre-schoolers, but rather for some arrangement to take care of children before and after classes, or of some combination of service for both pre-schoolers and school age children. Similar results obtained for present WIN enrollees.

The child care services for WIN participants were indicated by the statistical analysis of the family composition of the enrollee. From random samples of program participants in the twenty-seven cities, it was indicated that more than fifty percent of the participants (with the exception of one program) had dependent children in the pre-school bracket; more than fifty percent had school-age children; a small percent had dependent children past school age; but only slightly under fifty percent had both pre-school and school-age children.

The implications of these findings are that child care arrangements must definitely be arranged for pre-school children; and school-age children must either have similar arrangements (although only part-time) or else these children must be trained to return to their homes and care for themselves while their mothers (or fathers) are still in training or at jobs. Those past school age will normally not require child care but since a large percentage of the WIN participants had both pre-school and school-age children, the child care plan for this group is complex and involves such things as different types of care for the individual children or at least a "latch-key" plan at the institution of the pre-school child, allowing the school-age child to enter and leave as school begins in the morning and recesses at the close of the day.

B.3.6 Summary Considerations Developed From the Study of Present WIN Mothers

Present WIN enrollees and their children requiring child care are a unique subset of the total universe of those needing child care. It is important to understand from the outset that the participants enrolled in the WIN program, especially during the formative stages of each program, are not representative of other parents and children, or other AFDC parents and children for that matter. Generalization about child care program for future WIN participants and others should not be assumed from the present observations, or at least should be carefully considered within the following framework.

- —WIN mothers have been transferred from other training programs (CEP, Title V, NYC) where they already had made child care arrangements. Second, in order for the local WIN program to meet its quota and fill all slots allocated, mothers with the least problems are recruited or enrolled. Third, mothers volunteering for WIN are highly motivated and would most likely have made child care arrangements irrespective of the programs' offerings.
- —Any conclusions about the suitability of child care for WIN mothers are difficult since the participants have only been in the program components for a limited period of time. Results are not yet evident.
- —Some mothers are coerced into the WIN program. This has powerful implications as to how both the mother and child will accept the child care necessitated.

TABLE B-1.—SUMMARY OF CHILD CARE BARRIERS AND PROCEDURES

	Project areas								
	A	B	C	D	E	F	G	H	I
CHILD CARE INFORMATION									
Structure or organization within WIN or connected to it to help arrange child care.					X				X
Structure exists but WIN mothers not put in contact with it.		X [1]		X [2]				X [3]	
FACILITIES PROBLEMS									
Severe lack of facilities	X		X	X		X	X	X	
Facilities which are available are restricted from WIN use; child care generally limited to 1 type.		X		X	X				
Use of unchecked and unlicensed facilities common.			X	X	X	X	X	X	
Licensed day care home list not filled				X			X	X	
LICENSING PROBLEMS									
Complaints made about difficulty in meeting local standards.	X		X			X	X	X	
PAYMENTS									
Delays in payment to mothers critical as problem		X	X	X	X	X	(4)	X	X
Vendor or parent payment authorized	V, P	V, P	P	V	V	V, P		V, P	V

	Project areas							
	J	K	L	M	N	O	P	Q
CHILD CARE INFORMATION								
Structure or organization within WIN or connected to it to help arrange child care.			X				X	Rural area; no care needed at this time.
Structure exists but WIN mothers not put in contact with it.	X[5]			X[6]	X[7]	X		
FACILITIES PROBLEMS								
Severe lack of facilities	X		X	X		X	X	
Facilities which are available are restricted from WIN use; child care generally limited to 1 type.							X	
Use of unchecked and unlicensed facilities common	X	X		X	X			
Licensed day care home list not filled				X	X			
LICENSING PROBLEMS								
Complaints made about difficulty in meeting local standards.	X			X	X	X		
PAYMENTS								
Delays in payment to mothers critical as problem	X		X			X		
Vendor or parent payment authorized	V	V		V	V,P	V,P	V,P	

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[1] Unit exists but all mothers not in contact with it. Unit is primarily to find and license homes. It provides references to homes—not services to homes or children needing care.

[2] 5 mothers maintain licensed homes for WIN mothers exclusively, but few mothers know of unit.

[3] Day care unit for recruiting and servicing licensed day care homes, but available ones are not located conveniently. Payment schedule is low for WIN mothers.

[4] No payment schedule or payments yet.

[5] New unit exists, but is not generally known of, and mothers not referred there.

[6] Specialists in each division keep accurate up-to-date information on all child care resources. They act as resources, but WIN mothers not referred to them by caseworkers.

[7] Caseworkers are not informed of resources or even of welfare department's purchase of care. Welfare has not "approved" many facilities because they have not gotten around to it yet.

TABLE B-2.—AFDC CHILD CARE STATISTICS

Age groups	Dependents													Total households [1]
	1	2	3	4	5	6	7	8	9	10	11	12	>12	
A (0–5 years)	221,860	133,200	52,060	12,070	1,750	100	0	100	0	0	0	0	0	421,100
B (6–15 years)	157,530	115,060	70,420	41,030	18,960	7,930	1,950	720	0	0	0	0	0	413,600
A, B	0	68,250	108,260	106,710	74,130	46,400	28,460	13,200	6,390	3,190	520	100	0	455,600
C (16 years +)	70,940	12,570	1,450	0	0	0	0	0	0	0	0	0	0	85,000
A, C	0	6,190	2,890	1,650	0	0	0	0	0	0	0	0	0	10,700
B, C	0	52,260	51,860	42,980	28,040	12,800	8,450	4,340	920	200	300	0	0	202,200
A, B, C	0	0	7,310	12,680	17,420	18,250	12,170	10,100	8,250	3,820	1,340	920	520	92,800
Total households [1]	450,300	387,500	294,300	217,100	140,300	85,500	51,000	28,500	15,600	7,200	2,200	1,000	500	1,681,000

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[1] All totals are rounded to nearest 100.

Legend: A=0–5 years (preschool); B=6–15 years (in school); C=16 years and over (eligible for WIN).

1969 AFDC survey—National totals, number of dependent children recipients by age group; population: 1,681,000 households.

—Child care may not be the determining factor in a mother's participation in the WIN program; more important is the mother's feeling about working. This attitude is the major factor influencing the mother's perception as to whether the arrangements are satisfactory to her.

If the mother wants a job and wishes to participate in WIN, she will make sacrifices in the area of child care; will go to any length to get child care; may even pretend to have child care; will have lower standards of what acceptable child care is; and will have a higher tolerance of child care inconveniences and problems.

The mother who cares first about care of her children may give up job opportunities if they interfere with her idea of quality care. Mothers, irrespective of their priorities, who do not want to participate in WIN often refuse to make any effort to obtain child care; are not apt to accept child care plans made for them or suggested to them; set higher standards of acceptable child care in order to avoid participation; readily find problems with child care arrangements or plans; and refuse to tolerate as many inconveniences.

B.3.7 Alternatives

Child care should not be considered in isolation from other program considerations. The extent to which child care is needed depends on the extent to which jobs are available and the hours of work. Mothers need child care for whatever hours they are working. Eight-hour jobs require a *minimum* of nine or ten hours of child care (to include transportation time and conversation time to discuss what happened that day). Working women who are expected to be neat and clean on the job need time to shop and night jobs require some daytime care so mothers can sleep.

An alternative is to consider a more flexible job program so that the child care needs can determine a mother's job hours, instead of vice versa. Mothers with children in school could choose jobs which allow them to get children ready and off to school—then go to work—and be home before children return. Mothers who could find child care for afternoons only could choose a job for afternoons only. If a flexible job market were available, mothers could be more successful at both job and child care. Hours of existing child care facilities do not correspond with job hours.

Caretakers complained of mothers not picking up their children on time. Some family day care mothers had to threaten to stop taking care of the child if the mother didn't arrive on time, or actually did stop the service because the mother kept showing up hours after the agreed-upon departure time.

Another alternative would be to back up a step further and consider the goals of WIN and then approach those goals from a different direction. WIN is trying to get mothers into the labor market, but mothers without determination, without the desire to go to a job every day, will not accept a job or will have poor attendance records and will not keep the job for any length of time. It is obvious that training and job skills are not the only determination of "unemployability"—a mother's motivation is an important factor. But a mother who has little self-confidence, who is afraid of going into a strange environment (i.e., any unfamiliar place with unfamiliar people) and coping with a number of unknowns, is not going to be job ready even with the best day care. However, if the goal is changed from "providing jobs" or even "providing day care" to the goal of providing self-confidence and giving mothers the ability to think in terms of working (to move from an attitude of "I can't do that" to "I can") the possibility will be opened of a mother's preparing for work. Until a person reaches that point of believing she can work, training programs and other job preparations are futile. Instead of providing day care so that mothers can obtain jobs, it might be more effective (and more efficient in the long run) to concentrate on other aspects of the mother's life. The Parent-Child Center in one eastern city, for example, which does not have a goal of getting mothers out to work, has accidentally accomplished this as a side effect of its program.

The Parent-Child Center is a federally funded (OEO) project which grew out of conclusions about Head Start—that children aged four or five were already "too old." That is, things that set limits in a child's development have already happened by the time a child is four or five. The PCC works with infants and toddlers (children under age three) and their parents; parents and children attend together. Parents and children experience and learn together under the direction of trained staff. Parents work as assistant teachers. Some assistant teachers participate in the Outreach Program, providing services to homes in their neighborhood. The purpose of PCC is to help parents be able to take better care of their children. Staff have noticed that parents have changed their attitudes quite remarkably, which has in turn changed the type and quality of care they can give to their children.

APPENDIX F

Excerpts Relating to Child Care From the First Annual Report of the Department of Health, Education, and Welfare to the Congress on Services to Families Receiving Aid to Families With Dependent Children Under Title IV of the Social Security Act*

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Child Care Services

For AFDC mothers, as for all other mothers with young children, child care is indispensable if they are to accept regular employment. One of the most significant provisions of the 1967 Amendments was the requirement that child care services must be assured for mothers (or other adult caretakers) who needed these services in order to undertake training or employment. The Department's regulations provide that child care services meeting acceptable standards, including in-home and out-of-home services, must be available or provided to all persons referred to and enrolled in the WIN program, and to other persons for whom public welfare agencies have required training or employment. WIN child care expenditures are considered to be service costs rather than assistance costs, with $3 of Federal funds available to match every $1 of State and local funds expended. Once mothers are enrolled, public welfare agencies are expected to assure continuity of child care services throughout the period of enrollment in the WIN program and even afterwards, when employment has been secured, until it is feasible for mothers to meet the costs of child care or until they can make other satisfactory child care arrangements.

During the earlier stages of the WIN program, the number of children for whom child care payments were made was smaller than had been anticipated. In part this was due to the time required to get the program in operation in all of the States. In addition, priority was given in the earlier stages to fathers and to youth not attending school. Mothers initially enrolled often were transferred from Title V projects or other programs and had already made arrangements for child care, or they were volunteers who were selected in part because child care was readily available. Many welfare agencies did not assist mothers sufficiently in arranging child care due to lack of staff, inadequate training of staff in an area that was unfamiliar to many caseworkers and because child care resources were limited or unavailable. In more recent months, as Table 12 shows, the number of children for whom child care payments were made has been rising steadily, from 42,043 in July 1969 to an estimated 78,000 in June 1970. (Table 13 presents data by States as of December (1969). Federal expenditures for WIN child care amounted to $4.5 million in fiscal year 1969 and are estimated to exceed $15.4 million in fiscal year 1970.

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*Required under section 402(c) of the Social Security Act.

The types of arrangements made for children whose mothers were enrolled in the WIN program on December 31, 1969 are shown in Table 14 which covers all children under 15 years of age, whether or not public welfare agencies paid for their care. Although the table is based upon reports received from only 37 States and lacks information for several of the largest States, it nevertheless provides a useful description of the general pattern of WIN child care arrangements.

On the average, mothers had 2.5 children under age 15 for whom arrangements were reported. About two-fifths of the children were under 6 years of age and three-fifths were 6 through 14 years. About half of the children were cared for in their own homes; one-tenth, in the home of a relative; slightly less than one-fifth in a day care facility; and slightly less than a fifth were in other arrangements.

Of the children cared for in their own homes, one-tenth were cared for by the father; almost half by a relative other than the father; two-fifths by a non-relative; and less than 2 percent by a homemaker service. Of the children in day care facilities, over three-fifths were in family day care homes, about one-third in day care centers, and less than 3 percent in group day care homes. Finally, of the children in other arrangements, 9 out of 10 of whom were of school age, half had a mother who worked or received training only during the child's school hours; about one-fifth looked after themselves; and the remainder were in some other type of arrangement.

A critical national shortage of day care facilities is among the most urgent problems of the WIN program and must be remedied if the program is to move forward rapidly in the future. This is not merely a problem for this program and the AFDC mothers it serves. Accordingly to a survey of the child care arrangements of the nation's working mothers conducted by the Children's Bureau and the Women's Bureau, only 10 percent of the children of working mothers are cared for in day care facilities and probably less than half of this percentage are cared for by licensed or approved child care services. A Department of Labor survey of persons not in the labor force suggests that perhaps half a million women desire work but are prevented from seeking it because of inability to arrange child care. Although the problem affects families of widely varying income levels, it is more acute for low-income mothers who cannot afford the cost of adequate child care.

Statistics of WIN program operations give evidence of the shortage. As previously stated, unavailability of child care accounted for 10 percent of the individuals who were found to be inappropriate for referral to WIN manpower agencies during the last quarter of 1969. Incomplete data for only 33 States as of December 31, 1969, indicate that 4,600 mothers (or other caretakers) could not be referred for the sole reason that child care was unavailable. This was also the reason given in 6 percent of the cases referred back to welfare agencies by manpower agencies during the last quarter of 1969. The gaps and needs, moreover, are qualitative as well as quantitative. Child care arrangements made by mothers with neighbors or relatives are often fragile, and subject to frequent changes, interruptions, and breakdowns. Existing resources do not adequately meet the varied needs of children ranging in age from infancy to the older child of school age, nor the varied needs of mothers who may work on night shifts, during weekends, or other hours when child care is more difficult to arrange. Probably most serious of all are the cases in which the child care provided is inadequate or routine, lacking in opportunities for healthy child growth and development. In the end, the WIN program will be judged not only by the extent to which it enables mothers to obtain employment, but also by its performance as a program serving the welfare of children.

Among the barriers and problems in developing and providing child care services that have been identified by many State and local public welfare agencies are the following:

—Lack of State and local funds. Public welfare agencies have experienced great difficulty in raising the 25 percent share required to earn Federal funds.

—Lack of Federal funds for construction or major renovation of day care facilities. Current legislation bars the use of Title IV funds for these purposes.

—Inadequate levels of public welfare agency payments for child care. The level varies greatly over the country but is often too low to be competitive in local markets and can only buy second-rate care. Some States do not pay for care provided by relatives.

—Shortage of staff in public welfare agencies, high rates of staff turnover, and inadequate training of staff. Many caseworkers have little knowledge about child care and have had insufficient training in relation to the WIN program as a whole.

—Shortage of child care personnel. In many communities a major obstacle is the shortage of persons with training or experience in group child care programs. Child care staff are often in positions of low status and low salaries.

—Federal, State, and local standards are often believed to be unrealistic. Local building codes and fire and welfare ordinances often make development of day care centers difficult, especially in inner city areas where many AFDC mothers live. Often women who might become day care mothers are reluctant to meet licensing requirements. Some agencies believe the Federal Interagency Day Care Standards are unrealistic. These are now under review by the Department.

Despite these problems, progress has been made in providing child care for more children, using Title IV–A and IV–B funds, both for children whose mothers are in the WIN program and for other children. The number of licensed day care facilities has been growing, partly due to the strengthening of the licensing programs of public welfare agencies. In recent years agencies have substantially increased the number of staff giving full-time to licensing and to community planning and development of child care services. Some agencies have obtained matching funds from third-party sources, such as the Model Cities program, school districts, or private contributions. More public agencies are operating day care centers and more are purchasing care on a contract basis covering groups of children rather than on an individual child basis. Some agencies are using subprofessionals, including AFDC mothers, to recruit day care homes or to serve as child care personnel. In at least one State, recent legislation making funds available for construction of day care facilities marked a significant breakthrough.

Major efforts are urgently needed, at Federal, State, and local levels, to alleviate the shortage of facilities and to develop the variety, quantity, and quality of services needed. The child care provisions of the proposed Family Assistance Act, now before the Congress, would go well beyond the capabilities of the WIN program toward assuring the availability of child care resources throughout the country. The Act eliminates or substantially reduces the burden of State matching, provides flexible authority as to who provides the service, and authorizes expenditures for construction of facilities.

APPENDIX G

Standards and Costs for Day Care

(Prepared by the Department of Health, Education, and Welfare, Office of Child Development in 1967)

NOTES

A. This analysis is divided into three parts representing distinct types of day care situations:

(1) Care in a center for the full day;
(2) Care in a foster home for the full day; and
(3) Care in a center before and after school and during the summer.

There are many possible variations in the use of these three types, but most commonly, group one is used for children 3–6, group two for children under three and group three for children of school age (up to 14).

B. Costs can vary enormously depending on the areas of the country being served. For example, Federal agencies report a range of $1,000 to $1,900 for the same type of program in various parts of the nation. These variations reflect differences in salary and cost levels as well as differences in the kinds of services generally available to a child (e.g., the existence or non-existence of a Medicaid program). In the analysis most of the costs are based on Head Start experience with day care programs of the group one type. It should be remembered that Head Start programs generally have 10–20% of their costs covered by non-Federal contributions which may or may not be available to Social Security Day Care programs.

C. The analysis projects standards at three different levels of quality: (1) minimum, (2) acceptable and (3) desirable. "Minimum" is defined as the level essential to maintaining the health and safety of the child, but with relatively little attention to his developmenal needs. "Acceptable" is defined to include a basic program of developmental activities as well as providing minimum custodial care. "Desirable" is defined to include the full range of general and specialized developmental activities suitable to *individualized* development. Individual experts will differ as to the elements required for each level of quality. Most experts feel that the disadvantages to children of a "minimum" level program far outweigh the advantages of having the mother work. Some will feel that for children from "disadvantaged" homes only the "desirable" level is appropriate. The figures shown represent a consensus among a number of experts of what would be required at each level of quality.

D. The costs shown are potentially reduceable by the availability of free space or transportation and by the availability of services such as medical care through other funding sources. Fees paid by the parents will also reduce costs. Under the Social Security legislation, 25% of the cost is provided through state funds so the Federal cost in net may be 60–70% of the totals shown.

STANDARDS AND COSTS OF DAY CARE: TABLE A, COMPARATIVE SUMMARY OF COST PER CHILD

	Minimum	Acceptable	Desirable
Group day care: Generally used for 3–5 year olds (total)	$1,245	$1,862	$2,320
Foster day care: Generally used for children under 3 (total)	1,423	2,032	2,372
Before and after school and summer care: Generally used for children 6–13 (total)	310	653	653

STANDARDS AND COSTS OF DAY CARE: TABLE B, FULL DAY IN A CENTER

[Based on centers providing service 10–12 hours a day, 5 days a week]

Program element	Levels of quality					
	Minimum		Acceptable		Desirable	
	Description	Annual cost per child	Description	Annual cost per child	Description	Annual cost per child
1. Food, meals, and snacks.	1 meal and snacks	$140	2 meals and snacks	$210	2 meals and snacks	$210
2. Transportation	Provided at parent expense		Provided by center	60	Provided by center	60
3. Medical and dental services.	Examinations and referral services.	20	Examinations and referral service.	20	Examinations, treatment when not otherwise available, and health education.	60
4. Work with parents	Little or none except on problem cases.	10	General parent activities plus limited counseling services.	30	Parent education, family-type activities, full counseling services.	70
5. Facilities and utilities (rental).	Space meeting State and local licensing requirements.	90	Same	90	Space providing more generous room for child activities plus room for work with parents.	110
6. Clothing and other emergency needs.	As necessary	20	As necessary	20	As necessary	20
7. Supplies and materials	Custodial program	40	General developmental program.	50	Individualized developmental program.	75

8. Equipment (annual replacement costs).	do	10	do	12	do	15
9. Staff:						
(a) Classroom, professional at 6,500.	1 per 20 children	275	1 per 15 children	405	1 per 15 children	405
(b) Classroom, nonprofessional at 4,400.	2 per 20 children	320	2 per 15 children	420	3 per 15 children	640
(c) Social service, professional at 6,600.	1 per 150 children	65	1 per 100 children	65	1 per 100 children	65
(d) Community, social service, parent or health aides at 4,400.	None		do	20	2 per 100 children	45
(e) Business and maintenance at 4,000.	2 per 100 children	80	3 per 100 children	120	3 per 100 children	120
(f) Special resource personnel (psychology, music, art, consultants, etc.) at 6,600.	Urgent need only	20	1 per 100 children	60	2 per 100 children	120
(g) Supervision at 8,000.	1 per 100 children	80	2 per 100 children	160	2 per 100 children	160
10. Training	Approximately 10 percent of salary costs.	75	Approximately 10 percent of salary costs.	120	Approximately 10 percent of salary costs.	145
Total per child		1,245		1,862		2,320

STANDARDS AND COSTS OF DAY CARE: TABLE C, FOSTER DAY CARE SITUATION

[Based on centers providing service 10–12 hours a day, 5 days a week]

Program element	Levels of quality					
	Minimum		Acceptable		Desirable	
	Description	Annual cost per child	Description	Annual cost per child	Description	Annual cost per child
1. Food, meals and snacks	1 meal and snacks	$100	2 meals and snacks	$150	2 meals and snacks	$150
2. Transportation	Parents responsible		Parents responsible		Parents responsible	
3. Medical and dental services.	Examination and referral services.	20	Examination and referral services.	20	Examinations, treatment when not otherwise available and health education.	60
4. Work with parents	Little or none except on problem cases.	10	General parent activities plus limited counseling services.	30	Parent education family type activities, full counseling services.	70
5. Facilities and utilities (rental).	Special maintenance allowance in lieu of rent plus central administrative space.	30	Same	30	Same	30
6. Clothing and other emergency needs.	As necessary	20	As necessary	20	As necessary	20

7. Supplies and materials	Limited developmental	20	Developmental program	35	Enriched developmental program.	50
8. Equipment (annual replacement costs).	do	9	do	15	do	20
9. Staff						
(a) Day care mother at 4,400.	1 per 5 children	880	1 per 4 children	1,100	1 per 4 children	1,100
(b) Social service professional at 6,600.	1 per 150 children	44	1 per 100 children	66	1 per 100 children	66
(c) Community, social service, parent or health aides at 4,400.	None		do	44	2 per 100 children	44
(d) Business at $4,400	2 per 100 children	80	2 per 100 children	80	do	80
(e) Special resource personnel (psychology, music, art, consultants, etc.) at $6,600.	Urgent needs only	20	do	132	4 per 100 children	264
(f) Supervision at $8,000	1 per 100 children at $8,000.	80	do	160	3 per 100 children	240
10. Training	Approximately 10 percent of salary costs.	110	Approximately 10 percent of salary costs.	150	Approximately of salary costs.	178
Total		1,423		2,032		2,372

STANDARDS AND COSTS OF DAY CARE: TABLE D, BEFORE AND AFTER SCHOOL AND SUMMER CARE

[Based on centers providing service 10-12 hours a day, 5 days a week]

Program element	Levels of quality					
	Minimum		Acceptable		Desirable	
	Description	Annual cost per child	Description	Annual cost per child	Description	Annual cost per child
During school months (40 weeks):						
1. Food, meals and snacks	Snack	$30	Snack and breakfast	$70	Snack and breakfast	$70
2. Work with parents	Urgent only	10	Supplementary to school services.	20	Supplementary to school services.	20
3. Facilities	Assume use of school or other nonrent facilities.	10	Same	10	Same	10
4. Supplies and materials	Custodial	20	Developmental	40	Developmental	40
5. Equipment (annual replacement costs).	do	10	do	15	do	15
6. Personnel:						
(a) Day care workers at $4,400.	1 per 25 children for 3 hours.	53	1 per 15 children for 3 hours.	88	1 per 15 children for 3 hours.	88
(b) Special resource personnel $6,600.	None		1 per 45	66	1 per 45	66
(c) Business at $4,000.	1 per 250 children	12	1 per 250 children	12	1 per 250 children	12

(d) Supervision at $8,000.	do	24	2 per 250 children	24	2 per 250 children	24
7. Training		9		28		28
Summer period (12 weeks):						
1. Food, meals and snacks	Snacks and 1 meal	35	Snacks and 2 meals	50	Snacks and 2 meals	50
2. Work with parents	Urgent only	5	Supplementary to school services.	15	Supplementary to school services.	15
3. Facilities	Assume use of school or other nonrent facilities.	20	Some	20	Same	20
4. Supplies and materials	Custodial	10	Developmental	15	Developmental	15
5. Equipment (annual replacement costs).	do	5	do	10	do	10
6. Personnel:						
(a) Recreation supervisors at $4,400.	1 per 25 children (8 hours per day).	40	1 per 15 children (8 hours per day).	65	1 per 15 children (8 hours per day).	65
(b) Special resource personnell at $6,600.	None		1 per 30 children	55	1 per 30 children	55
(c) Business at $4,000.	1 per 250 children	4	1 per 250 children	4	1 per 250 children	4
(d) Supervision at $8,000.	do	8	3 per 250 children	24	3 per 250 children	24
7. Training	Approximately 10 percent of salaries.	5	Approximately 15 percent of salaries.	22	Approximately 15 percent of salaries.	22
Total		310		653		653

APPENDIX H

Excerpts From "A Study in Child Care 1970–1971," Prepared for the Office of Economic Opportunity by the ABT Associates

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Designing Three Basic Programs for 25, 50, and 75 Children

TABLE A.—ESTIMATED ANNUAL COSTS FOR CORE PROGRAM OF 25 CHILDREN (AVERAGE DAILY ATTENDANCE)

I. SUMMARY OF OPERATING COSTS

Total estimated cost, $58,719 (76 percent personnel, 6 percent foodstuffs, 9 percent rent, 9 percent other).

Cost per child, $2,349 per year, $1.12 per hour (cost per child/hour based on estimate of child/hours as 8.4 hours/child/day x 25 children x 250 days/year=52,500 hours/year).

II. FUNCTIONAL BUDGET SUMMARY

Category	Percent of total	Total cost	Cost per child
A. Care and teaching	52	$30,803	$1,232
B. Administration	22	12,845	514
C. Feeding	12	6,893	276
D. Health	1	824	33
E. Occupancy	13	7,354	294
Total	100	58,719	2,349

III. FUNCTIONAL BUDGET DETAIL

Category	Percent of category	Total cost	Cost per child
A. Care and teaching:			
1. Personnel	94	$28,928	$1,157
2. Educational consumables	3	875	35
3. Other	3	1,000	40
Subtotal	100	30,803	1,232
B. Administration:			
1. Personnel	84	10,745	430
2. Other	16	2,100	84
Subtotal	100	12,845	514
C. Feeding			
1. Personnel	42	2,893	116
2. Foodstuffs	54	3,750	150
3. Other	4	250	10
Subtotal	100	6,893	276
D. Health:			
1. Personnel	79	649	26
2. Other	21	175	7
Subtotal	100	824	33
E. Occupancy:			
1. Personnel	17	1,254	50
2. Rent	68	5,000	200
3. Other	15	1,100	44
Subtotal	100	7,354	294
Total		58,719	2,349

IV. PERSONNEL COMPONENT OF FUNCTIONAL BUDGET

A. Care and teaching:	
2 teachers (at $6,000)	$12,000
2 assistant teachers (at $5,400)	10,800
1 aide (at $3,450)	3,450
Fringe benefits and payroll taxes (at 10.2 percent)	2,678
Subtotal	28,928
B. Administration:	
1 director (at $8,400)	8,400
1 secretary, 1/4 time (at $5,400)	1,350
Fringe benefits and payroll taxes (at 10.2 percent)	995
Subtotal	10,745
C. Feeding:	
1 cook, 1/2 time (at $5,250)	2,625
Fringe benefits and payroll taxes (at 10.2 percent)	268
Subtotal	2,893
D. Health:	
1 nurse, 1/10 time (at $5,900)	590
Fringe benefits and payroll taxes (at 10.2 percent)	59
Subtotal	649
E. Occupancy:	
1 custodian, 1/4 time (at $4,550)	1,138
Fringe benefits and payroll taxes (at 10.2 percent)	116
Subtotal	1,254
Total	44,649

TABLE B.—ESTIMATED ANNUAL COSTS FOR CORE PROGRAM OF 50 CHILDREN (AVERAGE DAILY ATTENDANCE)

I. SUMMARY OF OPERATING COSTS

Total estimated cost: $111,135 (74 percent personnel, 7 percent foodstuffs, 9 percent rent, 10 percent other).

Cost per child: $2,223 per year, $1.06 per hour. (Cost per child/hour based on estimate of child/hours as 8.4 hours/child/day times 50 children times 250 days/year equals 105,000 hours/year).

II. FUNCTIONAL BUDGET SUMMARY

Category	Percent of total	Total cost	Cost per child
A. Care and teaching	56	$62,432	$1,249
B. Administration	19	21,171	423
C. Feeding	11	11,802	236
D. Health	1	1,650	33
E. Occupancy	13	14,080	282
Total	100	111,135	2,223

III. FUNCTIONAL BUDGET DETAIL

Category	Percent of category	Total cost	Cost per child
A. Care and teaching:			
1. Personnel	94	$58,682	$1,174
2. Educational consumables	3	1,750	35
3. Other	3	2,000	40
Subtotal	100	62,432	1,249
B. Administration:			
1. Personnel	80	16,971	339
2. Other	20	4,200	84
Subtotal	100	21,171	423
C. Feeding:			
1. Personnel	32	3,802	76
2. Foodstuffs	64	7,500	150
3. Other	4	500	10
Subtotal	100	11,802	236
D. Health:			
1. Personnel	79	1,300	26
2. Other	21	350	7
Subtotal	100	1,650	33
E. Occupancy:			
1. Personnel	13	1,880	38
2. Rent	71	10,000	200
3. Other	16	2,200	44
Subtotal	100	14,080	282
Total		111,135	2,223

IV. PERSONNEL COMPONENT OF FUNCTIONAL BUDGET

A. Care and teaching:	
1 head teacher at $6,750	$6,750
3 teachers at $6,000	18,000
4 assistant teachers at $5,400	21,600
2 aides at $3,450	6,900
Fringe benefits and payroll taxes at 10.2 percent	5,432
Subtotal	58,682
B. Administration:	
1 director at $9,400	9,400
1 administrative assistant at $6,000	6,000
Fringe benefits and payroll taxes at 10.2 percent	1,571
Subtotal	16,971
C. Feeding:	
1 cook, 2/3 time at $5,250	3,450
Fringe benefits and payroll taxes at 10.2 percent	352
Subtotal	3,802
D. Health:	
1 nurse, 2/10 time at $5,900	1,180
Fringe benefits and payroll taxes at 10.2 percent	120
Subtotal	1,300
E. Occupancy:	
1 custodian, 3/8 time at $4,550	1,706
Fringe benefits and payroll taxes at 10.2 percent	174
Subtotal	1,880
Total	82,635

TABLE C.—ESTIMATED ANNUAL COSTS FOR CORE PROGRAM OF 75 CHILDREN (AVERAGE DAILY ATTENDANCE)

I. SUMMARY OF OPERATING COSTS

Total estimated cost: $164,186 (74 percent personnel, 7 percent foodstuffs, 9 percent rent, 10 percent other).

Cost per child: $2,189 per year, $1.04 per hour (cost per child/hour based on estimate of child/hours as 8.4 hours/child/day x 75 children x 250 days/year=157,000 hours/year.

II. FUNCTIONAL BUDGET SUMMARY

Category	Percent of total	Total cost	Cost per child
A. Care and teaching	56	$92,408	$1,232
B. Administration	20	32,638	435
C. Feeding	10	15,857	212
D. Health	1	2,476	33
E. Occupancy	13	20,807	277
Total	100	164,186	2,189

III. FUNCTIONAL BUDGET DETAIL

Category	Percent of category	Total cost	Cost per child
A. Care and teaching:			
1. Personnel	94	$86,783	$1,157
2. Educational consumables	3	2,625	35
3. Other	3	3,000	40
Subtotal	100	92,408	1,232
B. Administration:			
1. Personnel	81	26,338	351
2. Other	19	6,300	84
Subtotal	100	32,638	435
C. Feeding:			
1. Personnel	24	3,857	52
2. Foodstuffs	71	11,250	150
3. Other	5	750	10
Subtotal	100	15,857	212
D. Health:			
1. Personnel	79	1,951	26
2. Other	21	525	7
Subtotal	100	2,476	33
E. Occupancy:			
1. Personnel	12	2,507	33
2. Rent	72	15,000	200
3. Other	16	3,300	44
Subtotal	100	20,807	277
Total	100	164,186	2,189

IV. PERSONNEL COMPONENT OF FUNCTIONAL BUDGET

A. Care and teaching:	
6 teachers at $6,000	$36,000
6 assistant teachers at $5,400	32,400
3 aids at $3,450	10,350
Fringe benefits and payroll taxes at 10.2 percent	8,033
Subtotal	86,783
B. Administration:	
1 director at $10,450	10,450
1 assistant director at $7,750	7,750
1 secretary/bookkeeper at $5,700	5,700
Fringe benefits and payroll taxes at 10.2 percent	2,438
Subtotal	26,338
C. Feeding:	
1 cook, 2/3 time at $5,250	3,500
Fringe benefits and payroll taxes at 10.2 percent	357
Subtotal	3,857
D. Health:	
1 nurse, 3/10 time at $5,900	1,770
Fringe benefits and payroll taxes at 10.2 percent	181
Subtotal	1,951
E. Occupancy:	
1 custodian, 1/2 time at $4,550	2,275
Fringe benefits and payroll taxes at 10.2 percent	232
Subtotal	2,507
Total	121,436

APPENDIX I

Federal Interagency Day Care Requirements

Code of Federal Regulations, Title 45, Subtitle A

Part 71—Federal Interagency Day Care Requirements

Subpart A—General

Sec.
71.1 Definitions.
71.2 Scope and purpose.
71.3 Application or requirements.
71.4 Waiver of requirements.
71.5 Effective date of requirements.
71.6 Enforcement of requirements.

Subpart B—Comprehensive and Coordinated Services

71.10 Types of facilities.
71.11 Grouping of children.
71.12 Licensing or approval of facilities as meeting the standards for such licensing.
71.13 Environmental standards.
71.14 Educational services.
71.15 Social services.
71.16 Health and nutrition services.
71.17 Training of staff.
71.18 Parent involvement.
71.19 Administration and coordination.
71.20 Evaluation.

AUTHORITY: The provisions of this Part 71 issued under sec. 522(d), 81 Stat. 713, sec. 602, 78 Stat. 528, 42 U.S.C. 2932(d), 2942; sec. 1102, 49 Stat. 647, 42 U.S.C. 1302; sec. 7, 64 Stat. 1107, as renumbered sec. 301, 79 Stat. 35, 20 U.S.C. 242; sec. 1001(c), 80 Stat. 1475, sec. 14, 79 Stat. 80, 42 U.S.C. 2610c, 2616.

SOURCE: The provisions of this Part 71 appear at 34 F.R. 1390, Jan. 29, 1969, unless otherwise noted.

Subpart A—General

§ 71.1 *Definitions*

As used in this part:

(a) "Day care services" means comprehensive and coordinated sets of activities providing direct care and protection of infants, preschool and school-age children outside of their own homes during a portion of a 24-hour day. (The Office of Economic Opportunity uses 7 hours as the minimum time period for its preschool day care programs; however, most of the standards in this document are also applicable to part-day Head Start programs.) Comprehensive services include, but are not limited to, educational, social, health, and nutritional services and parent participation. Such services require provision of supporting activities including administration, coordination, admissions, training and evaluation.

(b) "Administering agency" means any agency which either directly or indirectly receives Federal funds for day care services subject to the Federal Interagency Day Care Standards and which has ultimate responsibility for the conduct of such a program. Administering agencies may receive Federal funds through a State agency or directly from the Federal Government. There may be more than one administering agency in a single community.

(c) "Operating agency" means an agency directly providing day care services with funding from an administering agency. In some cases, the administering and operating agencies may be the same, e.g., public welfare departments or community action agencies which directly operate programs. Portions of the required services may be performed by the administering agency.

(d) "Day care facility" means the place where day care services are provided to children; e.g., family day care homes, group day care homes, and day care centers. Facilities do not necessarily provide the full range of day care services. Certain services may be provided by the administering or operating agency.

(e) "Standards." Standards consist of both interagency requirements and recommendations. The requirements only are presented in this document; the recommendations will be issued separately.

(1) "Interagency requirements" means a mandatory policy which is applicable to all programs and facilities funded in whole or in part through Federal appropriations.

(2) "Interagency recommendations" means an optional policy based on what is known or generally held to be valid for child growth and development which is recommended by the Federal agencies and which administering agencies should strive to achieve.

§ 71.2 *Scope and purpose*

The legislative mandates of the Economic Opportunity Amendments of 1967 require that the Secretary of Health, Education, and Welfare and the Director of the Office of Economic Opportunity coordinate programs under their jurisdictions which provide day care so as to obtain, if possible, a common set of program standards and regulations and to establish mechanisms for coordination at State and local levels. The Secretary of Labor has joined with the Director of the Office of Economic Opportunity and the Secretary of Health, Education, and Welfare in approving these standards. Accordingly, this part sets forth Federal interagency requirements which day care programs must meet if they are receiving funds under any of the following programs:

(a) Title IV of the Social Security Act: Part A—Aid to Families With Dependent Children; Part B—Child Welfare Services.

(b) Title I of the Economic Opportunity Act—Youth Programs.

(c) Title II of the Economic Opportunity Act—Urban and Rural Community Action Programs.

(d) Title III of the Economic Opportunity Act—Part B—Assistance for Migrant, and other Seasonally Employed, Farmworkers and Their Families. (These Federal interagency requirements will not apply in full to migrant programs until July 1, 1969.)

(e) Title V of the Economic Opportunity Act—Part B—Day Care Projects.

(f) Manpower Development and Training Act.

(g) Title I of the Elementary and Secondary Education Act. (Programs funded under this title may be subject to these requirements at the discretion of the State and local education agencies administering these funds.)

§ 71.3 *Application of requirements*

(a) As a condition for Federal funding, agencies administering day care programs must assure that the requirements are met in all facilities which the agencies establish, operate or utilize with Federal support. If a facility does not provide all of the required services, the administering agency must assure that those that are lacking are otherwise provided.

(b) Administering agencies must develop specific requirements and procedures within the framework of the Federal interagency requirements and recommendations to maintain, extend, and improve their day care services. Additional standards developed locally may be higher than the Federal requirements and must be at least equal to those required for licensing or approval as meeting the standards established for such licensing. Under no circumstances may they be lower. It is the intent of the Federal Government to raise and never to lower the level of day care services in any State.

(c) The interagency requirements will be utilized by Federal agencies in the evaluation of operating programs.

(d) The provisions of this part cover all day care programs and facilities utilized by the administering agencies which receive Federal funds, whether these facilities are operated directly by the administering agencies or whether contracted to other agencies. Such programs and facilities must also be licensed or meet the standards of licensing applicable in the State. Day care may be provided:

(1) On a day care facility operated by the administering agency.

(2) In a day care facility operated by a public, voluntary, or proprietary organization which enters into a contract to accept children from the administering agency and to provide care for them under the latter's policies. (The operating organization may also serve children who are not supported by the administering agency.)

(3) Through some other contractual or other arrangement, including the use of an intermediary organization designed to provide coordinated day care services, or the use of facilities provided by employers, labor unions, or joint employer—union organizations.

(4) Through the purchase of care by an individual receiving aid to families with dependent children or child welfare services funds for the service.

§ 71.4 *Waiver of requirements*

Requirements can be waived when the administering agency can show that the requested waiver may advance innovation and experimentation and extend services without loss of quality in the facility. Waivers must be consistent with the provisions of law. Requests for waivers should be addressed to the regional office of the Federal agency which is providing the funds. Requirements of the licensing authority in a State cannot be waived by the Federal regional office.

§ 71.5 *Effective date of requirements*

The requirements apply to all day care programs initially funded and to those refunded after July 1, 1968. Administering agencies are expected to immediately initiate planning and action to achieve full compliance within a reasonable time. Except where noted, up to 1 year may be allowed for compliance provided there is evidence of progress and good intent to comply.

§ 71.6 *Enforcement of requirements*

(a) The basic responsibility for enforcement of the requirements lies with the administering agency. Acceptance of Federal funds is an agreement to abide by the requirements. State agencies are expected to review programs and facilities at the local level for which they have responsibility and make sure that the requirements are met. Noncompliance may be grounds for suspension or termination of Federal funds.

(b) The Federal agencies acting in concert will also plan to review the operation of selected facilities.

Subpart B—Comprehensive and Coordinated Services

§ 71.10 *Types of facilities*

It is expected that a community program of day care services will require more than one type of day care facility if the particular needs of each child and his parents are to be taken into consideration. Listed in this section are the three major types of day care facilities to which the Federal requirements apply. They are defined in terms of the nature of care offered. While it is preferable that the three types of facilities be available, this is not a requirement.

(a) The family day care home serves only as many children as it can integrate into its own physical setting and pattern of living. It is especially suitable for infants, toddlers, and sibling groups and for neghborhood-based day care programs, including those for children needing after-school care. A family day care home may serve no more than six children (3 through 14) in total (no more than five when the age range is infancy through six), including the family day care mother's own children.

(b) The group day care home offers family-like care, usually to school-age children, in an extended or modified family residence. It utilized one or several employees and provides care for up to 12 children. It is suitable for children who need before- and after-school care, who do not require a great deal of mothering or individual care, and who can profit from considerable association with their peers.

(c) The day care center serves groups of 12 or more children. It utilizes subgroupings on the basis of age and special need but provides opportunity for the experience and learning that accompany a mixing of ages. Day care centers should not accept children under 3 years of age unless the care available approximates the mothering in the family home. Centers do not usually attempt to simulate family living. Centers may be established in a variety of places: private dwellings, settlement houses, schools, churches social centers, public housing units, specially constructed facilities, etc.

§ 71.11 *Grouping of children*

The administering agency, after determining the kind of facility to be used, must ensure that the following limits on size of groups and child-to-adult ratios are observed. All new facilities must meet the requirements prior to Federal funding. Existing programs may be granted up to 3 years to meet this requirement, if evidence of progress and good intent is shown.

(a) Family day care home:

(1) Infancy through 6 years. No more than two children under two and no more than five in total, including the family day care mother's own children under 14 years old.

(2) Three through 14 years. No more than six children, including the family day care mother's children under 14 years old.

(3) (i) In the use of a family day care home, there must always be provision for another adult on whom the family day care mother can call in case of an emergency or illness.

(ii) There are circumstances where it would be necessary to have on a regular basis two adults in a family day care home; for example, if one or more of the children were retarded, emotionally disturbed, or handicapped and needed more than usual care.

(iii) The use of volunteers is very appropriate in family day care. Volunteers may include older children who are often very successful in working with younger children when under adequate supervision.

(b) Group day care home:

(1) Three through 14 years. Groups may range up to 12 children but the child—staff ratio never exceeds six to one. No child under three should be in this type of care. When preschool children are cared for, the child—staff ratio should not exceed five to one.

(2) (i) Volunteers and aides may be used to assist the adult responsible for the group. Teenagers are often highly successful in working with younger children, but caution should be exercised in giving them supervisory responsibility over their peers.

(ii) As in family day care, provision must be made for other adults to be called in case of an emergency or illness.

(c) Day care center:

(1) Three to 4 years. No more than 15 in a group with an adult and sufficient assistants, supplemented by volunteers, so that the total ratio of children to adults is normally not greater than 5 to 1.

(2) Four to 6 years. No more than 20 in a group with an adult and sufficient assistants, supplemented by volunteers, so that the total ratio of chlidren to adults is normally not greater than 7 to 1.

(3) Six through 14 years. No more than 25 in a group with an adult and sufficient assistants, supplemented by volunteers, so that the total ratio of children to adults is normally not greater than 10 to 1.

(4) (i) The adult is directly responsible for supervising the daily program for the children in her group and the work of the assistants and volunteers assigned to her. She also works directly with the children and their parents, giving as much individual attention as possible.

(ii) Volunteers may be used to supplement the paid staff responsible for the group. They may include older children who are often highly successful in working with younger children. Caution should be exercised in assigning teenagers supervisory responsibility over their peers.

(d) Federal interagency requirements have not been set for center care of children under 3 years of age. If programs offer center care for children younger than 3, State licensing regulations and requirements must be met. Center care for children under 3 cannot be offered if the State authority has not established acceptable standards for such care.

§ 71.12 *Licensing or approval of facilities as meeting the standards for such licensing*

Day care facilities must be licensed or approved as meeting the standards for such licensing. If the State licensing law does not fully cover the licensing of these facilities, acceptable standards must be developed by the licensing authority or the State welfare department and each facility must meet these standards if it is to receive Federal funds.

§ 71.13 *Environmental standards*

(a) *Location of day care facilities.* (1) Members of low income or other groups in the population and geographic areas who (i) are eligible under the regulations of the funding agency and (ii) have the greatest relative need must be given priority in the provision of day care services.

(2) In establishing or utilizing a day care facility, all the following factors must be taken into consideration:

(i) Travel time for both the children and their parents.

(ii) Convenience to the home or work site of parents to enable them to participate in the program.

(iii) Provision of equal opportunities for people of all racial, cultural, and economic groups to make use of the facility.

(iv) Accessibility of other resources which enhance the day care program.

(v) Opportunities for involvement of the parents and the neighborhood.

(3) Title VI of the Civil Rights Act of 1964 requires that services in programs receiving Federal funds are used and available without discrimination on the basis of race, color or national origin.

(b) Safety and sanitation. (1) The facility and grounds used by the children must meet the requirements of the appropriate safety and sanitation authorities.

(2) Where safety and sanitation codes applicable to family day care homes, group day care homes, or day care centers do not exist or are not being implemented, the operating agency or the administering agency must work with the appropriate safety and sanitation authorities to secure technical advice which will enable them to provide adequate safeguards.

(c) *Suitability of facilities.* Each facility must provide space and equipment for free play, rest, privacy and a range of indoor and outdoor program activities suited to the children's ages and the size of the group. There must be provisions for meeting the particular needs of those handicapped children enrolled in the program. Minimum requirements include:

(1) Adequate indoor and outdoor space for children appropriate to their ages, with separate rooms or areas for cooking, toilets and other purposes.

(2) Floors and walls which can be fully cleaned and maintained and which are nonhazardous to the children's clothes and health.

(3) Ventilation and temperature adequate for each child's safety and comfort.

(4) Safe and comfortable arrangements for naps for young children.

(5) Space for isolation of the child who becomes ill, to provide him with quiet and rest and reduce the risk of infection or contagion to others.

§ 71.14 *Educational services*

(a) Educational opportunities must be provided every child. Such opportunities should be appropriate to the child's age regardless of the type of facility in which he is enrolled; i.e., family day care home, group day care home, or day care center.

(b) Educational activities must be under the supervision and direction of a staff member trained or experienced in child growth and development. Such supervision may be provided from a central point for day care homes.

(c) The persons providing direct care for children in the facility must have had training or demonstrated ability in working with children.

(d) Each facility must have toys, games, equipment and material, books, etc., for educational development and creative expression appropriate to the particular type of facility and age level of the children.

(e) The daily activities for each child in the facility must be designed to influence a positive concept of self and motivation and to enhance his social, cognitive, and communication skills.

§ 71.15 *Social services*

(a) Provision must be made for social services which are under the supervision of a staff member trained or experienced in the field. Services may be provided in the facility or by the administering or operating agency.

(b) Nonprofessionals must be used in productive roles to provide social services.

(c) Counseling and guidance must be available to the family to help it determine the appropriateness of day care, the best facility for a particular child, and the possibility of alternative plans for care. The staff must also develop effective programs of referral to additional resources which meet family needs.

(d) Continuing assessment must be made with the parents of the child's adjustment in the day care program and of the family situation.

(e) There must be procedures for coordination and cooperation with other organizations offering those resources which may be required by the child and his family.

(f) Where permitted by Federal agencies providing funds, provision should be made for an objective system to determine the ability of families to pay for part or all of the cost of day care and for payment.

§ 71.16 *Health and nutrition services*

(a) The operating or administering agency must assure that the health of the children and the safety of the environment are supervised by a qualified physician.

(b) Each child must receive dental, medical, and other health evaluations appropriate to his age upon entering day care and subsequently at intervals appropriate to his age and state of health. (If the child entering day care has not recently had a comprehensive health evaluation by a physician, this should be provided promptly after he enters a day care program.)

(c) Arrangements must be made for medical and dental care and other health related treatment for each child, using existing community resources. In the absence of other financial resources, the operating or administering agency must provide, whenever authorized by law, such treatment with its own funds. (The day care agency, in those instances where Federal funds are legally available to be expended for health services, has the ultimate responsibility of ensuring that no child is denied health services because his parents are unable to carry out an adequate health plan. Funds for aid to families with dependent children are not legally available for health care, but States are encouraged to use Medic-aid funds whenever possible.)

(d) The facility must provide a daily evaluation of each child for indications of illness.

(e) The administering or operating agency must ensure that each child has available to him all immunizations appropriate to his age.

(f) Advance arrangements must be made for the care of a child who is injured or becomes ill, including isolation if necessary, notification of his parents, and provisions for emergency medical care or first aid.

(g) The facility must provide adequate and nutritious meals and snacks prepared in a safe and sanitary manner. Consultation should be available from a qualified nutritionist or food service specialist.

(h) All staff members of the facility must be aware of the hazards of infection and accidents and how they can minimize such hazards.

(i) Staff of the facility and volunteers must have periodic assessments, including tuberculin tests or chest X-rays, of their physical and mental competence to care for children.

(j) The operating or administering agency must ensure that adequate health records are maintained on every child and every staff member who has contact with children.

§ 71.17 ***Training of staff***

(a) The operating or administering agency must provide or arrange for the provision of orientation, continuous inservice training, and supervision for all staff involved in a day care program—professionals, nonprofessionals, and volunteers—in general program goals as well as specific program areas; i.e., nutrition, health, child growth and development, including the meaning of supplementary care to the child, educational guidance and remedial techniques, and the relation of the community to the child.

(b) Staff must be assigned responsibility for organizing and coordinating the training program.

(c) Nonprofessional staff must be given career progression opportunities which include job upgrading and work-related training and education.

§ 71.18 *Parent involvement*

(a) Opportunities must be provided parents at times convenient to them to work with the program and, whenever possible, to observe their children in the day care facility.

(c) Whenever an agency (i.e., an operating or an administering agency) provides day care for 40 or more children, there must be a policy advisory committee or its equivalent at that administrative level where most decisions are made on the kinds of programs to be operated, the hiring of staff, the budgeting of funds, and the submission of applications to funding agencies. The committee membership should include not less than 50 percent parents or parent representatives, selected by the parents themselves in a democratic fashion. Other members should include representatives of professional organizations or individuals who have particular knowledge or skills in children's and family programs.

(d) Policy advisory committees (the structure of which will vary depending upon the administering agencies and facilities involved) must perform productive functions, including but not limited to:

(1) Assisting in the development of the programs and approving applications for funding.

(2) Participating in the nomination and selection of the program director at the operating and/or administering level.

(3) Advising on the recruitment and selection of staff and volunteers.

(4) Initiating suggestions and ideas for program improvements.

(5) Serving as a channel for hearing complaints on the program.

(6) Assisting in organizing activities for parents.

(7) Assuming a degree of responsibility for communicating with parents and encouraging their participation in the program.

§ 71.19 *Administration and coordination*

(a) *Administration.* (1) The personnel policies of the operating agency must be governed by written policies which provide for job descriptions, qualification requirements, objective review of grievances and complaints, a sound compensation plan, and statements of employee benefits and responsibilities.

(2) The methods of recruiting and selecting personnel must ensure equal opportunity for all interested persons to file an application and have it considered within reasonable criteria. By no later than July 1, 1969, the methods for recruitment and selection must provide for the effective use of nonprofessional positions and for priority in employment to welfare recipients and other low-income people filling those positions.

(3) The staffing pattern of the facility, reinforced by the staffing pattern of the operating and administering agency, must be in reasonable accord with the staffing patterns outlined in the Head Start Manual of Policies and Instructions and/or recommended standards developed by national standard-setting organizations.

(4) In providing day care through purchase of care arrangements or through use of intermediary organizations, the administering agency should allow waivers by the operating agency only with respect to such administrative matters and procedures as are related to their other functions as profit-making or private nonprofit organizations: provided, that in order for substantial Federal funds to be used, such organizations must include provisions for parent participation and opportunities for employment of low-income persons. Similarly, there must be arrangements to provide the total range of required services. All waivers must be consistent with the law.

(5) The operating or administering agency must provide for the development and publication of policies and procedures governing:

(i) Required program services (i.e., health, education, social services, nutrition, parent participation, etc.) and their integration within the total program.

(ii) Intake including eligibility for care and services, and assurance that the program reaches those who need it.

(iii) Financing, including fees, expenditures, budgeting, and procedures needed to coordinate or combine funding within and/or between day care programs.

(iv) Relations with the community, including a system of providing education about the program.

(v) Continuous evaluation, improvement, and development of the program for quality of service and for the expansion of its usefulness.

(vi) Recording and reporting of information required by State and Federal agencies.

(6) The administering and operating agencies and all facilities used by them must comply with title VI of the Civil Rights Act of 1964, which requires that services in programs receiving Federal funds are used and available without discrimination on the basis of race, color, or national origin.

(7) Where the administering agency contracts for services with private individuals or proprietary organizations, it must include contractual requirements designed to achieve the objectives of this section.

(b) *Coordination.* (1) Administering agencies must coordinate their program planning to avoid duplication in service and to promote continuity in the care and service for each child.

(2) State administering agencies have a responsibility to develop procedures which will facilitate coordination with other State agencies and with local agencies using Federal funds.

(3) Agencies which operate more than one type of program; e.g., a group day care home as well as day care center programs, are encouraged to share appropriate personnel and resources to gain maximum productivity and efficiency of operation.

§ 71.20 *Evaluation*

(a) Day care facilities must be evaluated periodically in terms of the Federal Interagency Day Care Requirements.

(b) Local operators must evaluate their own program activities according to outlines, forms etc., provided by the operating and administering agencies. This self-evaluation must be periodically planned and scheduled so that results of evaluation can be incorporated into the preparation of the succeeding year's plan.

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